

Date: 04/07/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr Dilip B. Patil
2. Designation : Professor/Principal
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP/Details : Newer infectious diseases

5. Financial Support Particulars (Rs)

i. Registration charges: 2100
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 04/07/2022

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

[Signature]
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 4/07/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arun Y Patil.
2. Designation : Professor
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME Newer
Infectious disease.

5. Financial Support Particulars (Rs)

i. Registration charges: 2100
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 4/07/2022

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

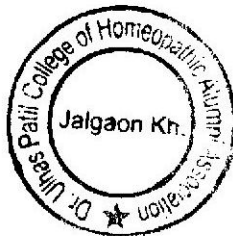
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 4/7/22

Financial Support Request Letter

1. Name of the Staff Member : Dr. Madhu Jagdishprasad Agrawal
2. Designation : Professor
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Newer
Infectious disease

5. Financial Support Particulars (Rs)

i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 4/7/22

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 04/07/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bharti M. Bais
2. Designation : Professor
3. Department : Organon of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME- Newer
Infectious disease

5. Financial Support Particulars (Rs)

i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 04/07/2022

Bais

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

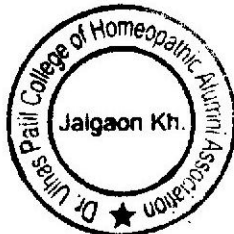
Sanctioned/ Not Sanctioned

Account Department

Hancha
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 4/7/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Vikram Uddhav Dhaneshwar
2. Designation : Professor
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Newer Infectious diseases

5. Financial Support Particulars (Rs)

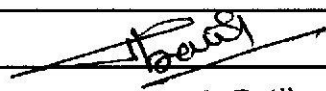
- i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 4/7/2022



Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____


Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 12/9/2020

Financial Support Request Letter

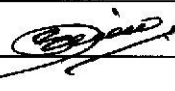
1. Name of the Staff Member : Dr. Bhushan S. Jain
2. Designation : Reader
3. Department : Obstetrics & Gynecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME on recent advance management in Tuberculosis Treatment

5. Financial Support Particulars (Rs)

i. Registration charges: RS 2250/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 12/9/2020

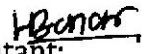

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 12/09/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr Sachin P. Patil
2. Designation : Reader
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME on Recent Advances Management in Tuberculosis Treatment

5. Financial Support Particulars (Rs)

i. Registration charges: 2250
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 12/09/2020

Patil
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Patil

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

H. B. B. B.
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 12/09/2020

Financial Support Request Letter

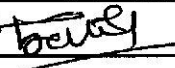
1. Name of the Staff Member : Dr. Alkesh Bishanchand Agrawal
2. Designation : Reader
3. Department : Teacher of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME on Recent advances Management in tuberculosis treatment

5. Financial Support Particulars (Rs)

i. Registration charges: 2250
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 12/09/2022

AB Agrawal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Anand
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 12/9/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Anil J. Bureane
2. Designation : Professor
3. Department : Practice of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - on Recent Advances Management in Tuberculosis treatment

5. Financial Support Particulars (Rs)

- i. Registration charges: 2250/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 12/9/20

Anil J. Bureane
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. Bureane
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 12/09/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ruprekha G Sankade
2. Designation : Reader
3. Department : Physiology Including Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME on Recent Advances Management in Tuberculosis Treatment

5. Financial Support Particulars (Rs)

i. Registration charges: 2250
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 12/09/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

[Signature]
Accountant:

Account Department

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 12/9/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Suresh V. Thombare
2. Designation : Reader
3. Department : Case taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME on Recent Advances Management in Tuberculosis treatment

5. Financial Support Particulars (Rs)

- i. Registration charges: 2250/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 12/9/2020

S. Thombare
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. Bonar
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 22/12/2022

Financial Support Request Letter

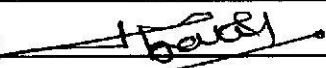
1. Name of the Staff Member : Dr. Indrayani W Badhe
2. Designation : Professor
3. Department : Pathology & microbiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Training program on Essential soft skill

5. Financial Support Particulars (Rs)

i. Registration charges: Rs 2050/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 22/12/2022

HBadh
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

HBondh
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 22/12/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bresti Manohar Rao Karmne
2. Designation : Reader
3. Department : Forensic Medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Training program on Essential soft skill

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 22/12/2022

Pshohar
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Noted~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. B. B.
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 22/12/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. (mes) Nilam Kailas. Sodhav.
2. Designation : Professor
3. Department : Cube taking & Laboratory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Training program
on essential soft skill.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 22/12/2022

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 22/12/22

Financial Support Request Letter

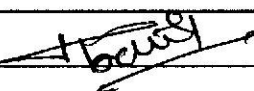
1. Name of the Staff Member : Dr. Arunesh B. shinde
2. Designation : Lecturer
3. Department : Physiology Including Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Training Program
- on Essential soft skill

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050/-
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date : 22/12/22


Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 22/12/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Manjusha V Ahire
2. Designation : Lecturer
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Training
program on Essential soft skills

5. Financial Support Particulars (Rs)

i. Registration charges: 2050
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 22/12/2022

[Signature]

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 8/3/2023

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin E Patil
2. Designation : Lecturer
3. Department : Organon of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
Emergency preparedness

5. Financial Support Particulars (Rs)

i. Registration charges: 2375/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 8/8/2023

Sachin E Patil
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Bhoir
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/9/2023

Financial Support Request Letter

1. Name of the Staff Member : Dr. Priyanka A. Lunba
2. Designation : Lecturer
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
Emergency preparedness

5. Financial Support Particulars (Rs)

i. Registration charges: Rs. 2375/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 8/08/2023

[Signature]

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 08/03/2023

Financial Support Request Letter

1. Name of the Staff Member : Dr Sayali A. Jyoti
2. Designation : Lecturer
3. Department : Forensic Medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP/Details : Workshop on
Emergency preparedness

5. Financial Support Particulars (Rs)

i. Registration charges: 2375/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 08/03/2023

S. Jyoti
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 8/03/2023

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ulka R. Hway
2. Designation : lecturer
3. Department : obstetrics & gynecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : workshop on
Emergency preparedness

5. Financial Support Particulars (Rs)

i. Registration charges: 2375
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 8/03/2023 Ulka R. Hway
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/3/23

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ratna K. Chopade
2. Designation : Lecturer
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on emergency preparedness

5. Financial Support Particulars (Rs)

- i. Registration charges: 2375/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/3/23

Proposed
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

H. Bonde
Accountant

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 08/03/2023.

Financial Support Request Letter

1. Name of the Staff Member : Dr. Simanchala Panigrahi
2. Designation : Professor
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
Emergency preparedness.

5. Financial Support Particulars (Rs)

i. Registration charges: 2375
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 08/03/2023 Signature of the Staff Members [Signature]

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/8/2023

Financial Support Request Letter

1. Name of the Staff Member : Dr. Maya Pundalik Sankale
2. Designation : Lecturer
3. Department : case taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
emergency preparedness

5. Financial Support Particulars (Rs)

i. Registration charges: 2375/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 8/8/2023

Maya Sankale
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : *Dr. Dilip B. Patil*

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. Bhandari
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 08/02/2022

Financial Support Request Letter

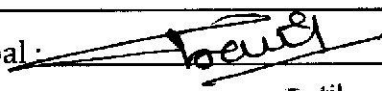
1. Name of the Staff Member : Dr Ulhas K Hiray
2. Designation : Lecturer
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date : 08/02/2022

U. Hiray
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

H. B. Chavhan
Accountant:

Account Department

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 08/02/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr Rataa k chopade
2. Designation : Lecturer
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CHINRAAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000
iv. Other if any : _____

Date : 08/02/2022 Chopade
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dillip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

H. Bunch
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 4/5/22

Financial Support Request Letter

1. Name of the Staff Member : Dr. Simanchala Panigrahi
2. Designation : Professor
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME

5. Financial Support Particulars (Rs)

- i. Registration charges: ₹. 2500/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 4/5/22

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 04/05/2022

Financial Support Request Letter

1. Name of the Staff Member : Dr. Maya. Pundlik Dambale
2. Designation : Lecturer
3. Department : Case Taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GNRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 2500
iv. Other if any : _____

Date : 04/05/2022

Dambale
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : H. B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 7/07/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Dilip B. Patil
2. Designation : Professor / Principal
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : RS 3000
iv. Other if any : _____

Date: 07/07/2021

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 07/07/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr Arun Y. Patil
2. Designation : Professor
3. Department : Idam Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : G T N R A F

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date : 07/07/2021

Arun Y. Patil
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____

Dr. Drip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

H. Bonar
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 7/7/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Madhu Jagdishprasad Agrewal
2. Designation : Professor
3. Department : Hom. Makua Medua
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000
iv. Other if any : _____

Date : 7/07/2021 [Signature] Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____

[Signature]
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 7/7/21

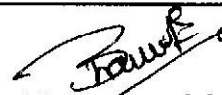
Financial Support Request Letter

1. Name of the Staff Member : Dr. Bharti M Bais
2. Designation : Professor
3. Department : Organon of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

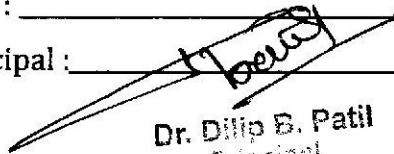
- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date: 7/7/21



Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____



Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 07/07/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Vikram Uddhav Dhaneshwar
2. Designation : Reader
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GJNRAF

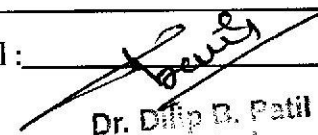
5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000
iv. Other if any : _____

Date : 07/07/2021


Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : _____


Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

H. B. D. R.
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 10/8/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bhushan S. Jain
2. Designation : Reader
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME

5. Financial Support Particulars (Rs)

- i. Registration charges: 2500/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 10/8/2021

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

H. Boncr
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date:

10/08/2021

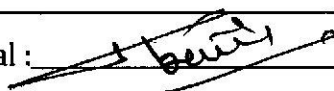
Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin D. Patil
2. Designation : Reader
3. Department : Surgery (Reader)
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
- ii. Travelling Allowances : _____
- iii. Membership fee : Rs 3000/-
- iv. Other if any : _____

Date : _____ Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

H. B. Patil
Accountant:
Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Account Department



Date: 18/10/2021

Financial Support Request Letter

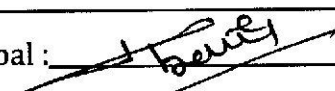
1. Name of the Staff Member : Dr. Akesh Bishanand Agrawal
2. Designation : Reader
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date: 18/10/2021

A. B. Agrawal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

H. Boner
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/2021

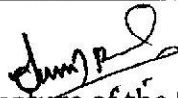
Financial Support Request Letter

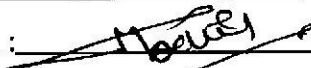
1. Name of the Staff Member : Dr. Sunil J. Bura
2. Designation : Professor
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : G INRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000
iv. Other if any : _____

Date : 18/10/2021


Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/21

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ruprekha G. Sankade
2. Designation : Reader
3. Department : Physiology Including
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date: 18/10/21

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Suresh V Thombare
2. Designation : Reader
3. Department : Case Taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GNRA 7

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date: 18/10/2021

S. Thombare
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

H. B. B. B.
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/24

Financial Support Request Letter

1. Name of the Staff Member : Dr. Indrapani N. Badhe
2. Designation : Professor
3. Department : Pathology & Microbiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: 8000/-
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date: 18/10/2024

J. B. Badhe
Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal : *[Signature]*

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:
Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Preeti Monohar Rao Karme
2. Designation : Reader
3. Department : Forensic medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : Rs 3000/-
iv. Other if any : _____

Date : _____ Signature of the Staff Members Bhushan

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr (Mrs) Nilam Kailas Jadhav
2. Designation : Professor
3. Department : Case Taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date: 18/10/2021

Dr. Jadhav
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dillip B. Patil

Dr. Dillip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

H. B. Bhandari
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Account Department



Date: 18/10/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arunesh B. Shinde.
2. Designation : Lecturer
3. Department : Physiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GJNRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000
iv. Other if any : _____

Date : 18/10/2021

Suio
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Honour
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 18/10/24

Financial Support Request Letter

1. Name of the Staff Member : Dr. Manjusha V. Ahire
2. Designation : Lecturer
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GJNRAF

5. Financial Support Particulars (Rs)

- i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : Rs. 3000/-
iv. Other if any : _____

Date: 18/10/24

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/10/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin E Patil
2. Designation : Lecturer
3. Department : Department of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GJNRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : 3000/-
iv. Other if any : _____

Date : 18/10/2021

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dillip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 02/12/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Pripankaj A. Lunkad (Gugale)
2. Designation : lecturer
3. Department : Hom. materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME

5. Financial Support Particulars (Rs)

- i. Registration charges: 2500 / -
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date : 02/12/2021

Pripankaj A. Lunkad
Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal : *Dr. Dilip B. Patil*

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Dr. Ulhas Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 2/12/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. sayali A Gunjal
2. Designation : Lecturer
3. Department : Forensic medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : GINRAF

5. Financial Support Particulars (Rs)

i. Registration charges: _____
ii. Travelling Allowances : _____
iii. Membership fee : Rs. 3000/-
iv. Other if any : _____

Date : 2/12/21 S. Gunjal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

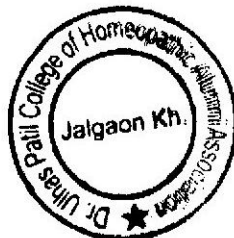
☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Chavhan
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 19/04/21

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin E Patil
2. Designation : lecturer
3. Department : Organon of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : cm & student
centered learning: strategies for engaging
Homoeopathic Education

5. Financial Support Particulars (Rs)

i. Registration charges: Rs 2200/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 19/04/2021

Patil
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Patil
Accountant

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 19/04/2021

Financial Support Request Letter

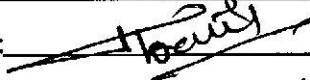
1. Name of the Staff Member : Dr. Priyanka A. Lunbad (Jugale)
2. Designation : Lecturer
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CM E- Student
Centered learning strategies for Engaging
Homeopathic Education

5. Financial Support Particulars (Rs)

- i. Registration charges: 2200/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 19/04/2021

P. Jugale
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: H. B. J. J.

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 19/04/2024

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sayali A Gunjal
2. Designation : Lecturer
3. Department : Forensic Medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CMC - Student
Centered Learning Strategies for Engaging
Homeopathic Education.

5. Financial Support Particulars (Rs)

i. Registration charges: 2200.
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date : 19/04/2024

Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal :

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Accountant: H. B. B. B.

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 19/04/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ratna K chopade
2. Designation : Lecturer
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Student
Centered Learning strategies for Engaging
Homoeopathic Education.

5. Financial Support Particulars (Rs)

i. Registration charges: 2200
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 19/04/2021

R Chopade
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~being~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Hancher
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 19/4/21

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ulka K. Hiray
2. Designation : Lecturer
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CMF
Student - centered Learning: Strategies for Engaging
Homeopathic Education

5. Financial Support Particulars (Rs)

i. Registration charges: Rs. 2200/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 19/4/21

Ulka
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jaigaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Honour
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jaigaon Kh



Date: 19/4/2021

Financial Support Request Letter

1. Name of the Staff Member : Dr. Simanchala Panigrahi
2. Designation : Professor
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Student - center
learning: strategies for engaging Homoeopathic
education

5. Financial Support Particulars (Rs)

- i. Registration charges: 2200/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 19/4/21

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/02/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr Manjusha V. Shire
2. Designation : Teacher
3. Department : Hom Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Workshop
in HSET

5. Financial Support Particulars (Rs)

i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/02/2020

[Signature]
Signature of the Staff Members

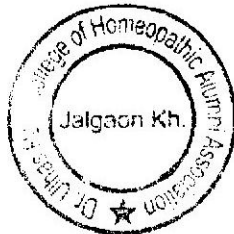
1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:
Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/08/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Dilip B. Patil
2. Designation : Professor & Principal
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop - Innovative Teaching Methods

5. Financial Support Particulars (Rs)

i. Registration charges: 2300
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/08/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. Bondre
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/8/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arun Y. Patil
2. Designation : Professor
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : workshop -
Innovative Teaching Method

5. Financial Support Particulars (Rs)

i. Registration charges: Rs. 2300/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/8/20

Chunp
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

H. B. Chavhan
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/08/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Madhu Jagdishprasad Agrawal
2. Designation : Professor
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop -
Innovative Teaching Method.

5. Financial Support Particulars (Rs)

i. Registration charges: 2300
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/08/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned / Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/08/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin D. Patil
2. Designation : Reader
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop -
Innovative teaching Methods

5. Financial Support Particulars (Rs)

i. Registration charges: 2300
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 17/08/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/08/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bharti M. Bai's
2. Designation : professor
3. Department : Organon of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Innovative teaching methods

5. Financial Support Particulars (Rs)

i. Registration charges: 2800/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/8/2020

Bai's

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : *Patil*

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/8/2020

Financial Support Request Letter

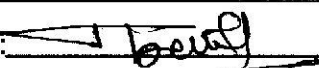
1. Name of the Staff Member : Dr. Vikram Uddhav Phaneswar
2. Designation : Reader
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop -
Innovative teaching methods

5. Financial Support Particulars (Rs)

i. Registration charges: Rs 2300/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/08/2020


Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

H30ndr
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/08/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr Bhushan S. Jain
2. Designation : Reader
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on Innovative Teaching Method

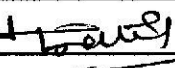
5. Financial Support Particulars (Rs)

i. Registration charges: 2300/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/08/2020



Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Hzonchr
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 17/8/2020

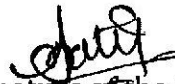
Financial Support Request Letter

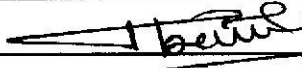
1. Name of the Staff Member : Dr. Sachin D. Patil
2. Designation : Reader
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop in
innovative teaching method

5. Financial Support Particulars (Rs)

i. Registration charges: 2000
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date : 17/8/2020


Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 17/8/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Akesh Bishanchand Agrawal
2. Designation : Reader
3. Department : Practice of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop -
Innovative Teaching Methods

5. Financial Support Particulars (Rs)

i. Registration charges: 22300/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 17/8/20

AB Agrawal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/12/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sunil J. Burase
2. Designation : professor
3. Department : Practice of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CMF- Psychological Impact of COVID-19, strategies to Overcome.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2100.
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 8/12/2020.

Sunil J. Burase
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: H. B. Bhandari

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/12/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ruprekha G. Sankhade
2. Designation : Reader
3. Department : Physiology including biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : EME - psychological impact of COVID-19, strategies to overcome.

5. Financial Support Particulars (Rs)

- i. Registration charges: 21001-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/12/2020

Sankhade
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/12/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Suresh V. Thombare
2. Designation : Reader
3. Department : Case taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details :
CM & psychological impact of covid 19, strategies to overcome.

5. Financial Support Particulars (Rs)

i. Registration charges: Rs 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/12/2020

Thombare
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: H. B. Bhatt

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 08/12/2020

Financial Support Request Letter

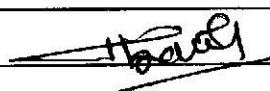
1. Name of the Staff Member : Dr Indrayani N Badhe
2. Designation : Professor
3. Department : Pathology & Microbiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Psychological impact of COVID 19, strategies to overcome

5. Financial Support Particulars (Rs)

- i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 08/12/2020

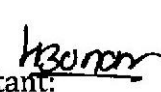
JN Badhe
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/12/2020

Financial Support Request Letter

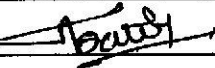
1. Name of the Staff Member : Dr. Preeti Manohar Rao Kocme.
2. Designation : Reader
3. Department : Forensic Medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Psychological impact of COVID 19, strategies to overcome.

5. Financial Support Particulars (Rs)

i. Registration charges: 2100
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/12/2020

Peshkhar
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal: 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

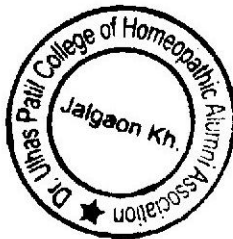
☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: H. Bhandari

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 8/12/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. (Mes). Nilam kailas Jadhav
2. Designation : Professor
3. Department : Case Taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CMF - Psychological impact of COVID 19, strategies to overcome

5. Financial Support Particulars (Rs)

- i. Registration charges: Rs. 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/12/20

Dr. Jadhav
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : *Dr. Dilip B. Patil*

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

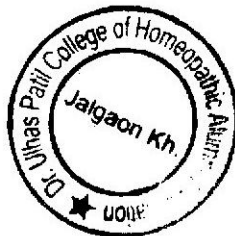
☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 8/12/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arunesh B. Shinde
2. Designation : Lecturer
3. Department : physiology Including Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - Psychological
Impact of COVID 19, strategies to Overcome

5. Financial Support Particulars (Rs)

i. Registration charges: 2100
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/12/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____

2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 8/12/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Manjusha V. Ahire
2. Designation : Lecturer
3. Department : Hom. pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME - psychological impact of COVID-19 strategies to overcome.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 8/12/2020

Bhim
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Dr. Dilip B. Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: Bhender

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/02/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Indrayani N Badhe.
2. Designation : Professor
3. Department : Pathology and Microbiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Workshop
in HSET

5. Financial Support Particulars (Rs)

i. Registration charges: 2100
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/02/2020

J. B. Badhe
Signature of the Staff Members

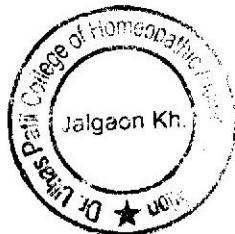
1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]
Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/2/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Preeti Manohar Rao Kame
2. Designation : Reader
3. Department : forensic medicine & toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Workshop
in HSET

5. Financial Support Particulars (Rs)

- i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/2/20

Bhalara
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : *[Signature]*

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

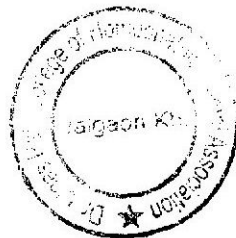
Sanctioned/ Not Sanctioned

Honor
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Account Department



Date: 18/02/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Milam Kailash Tadhar
2. Designation : Professor
3. Department : Case Taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Workshop
in HEST

5. Financial Support Particulars (Rs)

i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 18/02/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

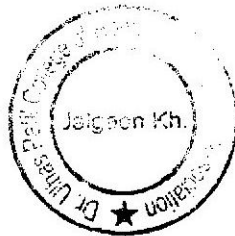
Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/2/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arunesh B. Shinde
2. Designation : Lecturer
3. Department : Physiology incl. Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Workshop
in HSET

5. Financial Support Particulars (Rs)

i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 18/2/20

Basu
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Basu

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

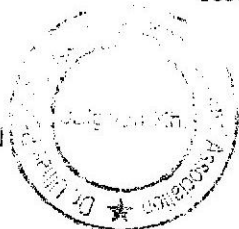
☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: H. B. Bhandari

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/02/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr Manjisha V Patil
2. Designation : lecturer
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Workshop
in HSEF

5. Financial Support Particulars (Rs)

i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/02/2020

Bail
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Account Department



Date: 18/02/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin E Patil
2. Designation : Lecturer
3. Department : Department of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic workshop
in HSET

5. Financial Support Particulars (Rs)

i. Registration charges: 2100
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date: 18/02/2020

Patil
Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal : H. B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

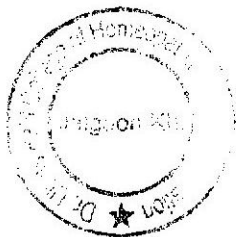
Sanctioned/ Not Sanctioned

Account Department

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/2/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Priyanka A. Lunkad (Gugale)
2. Designation : Lecturer
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic workshop
in HSET

5. Financial Support Particulars (Rs)

- i. Registration charges: 2100/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/2/20

Pugale
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

✓ Sanctioned/ Not Sanctioned

Account Department

Accountant: H. B. B. B.
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/6/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sayali A. Gurnjal
2. Designation : Lecturer
3. Department : forensic medicine & toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : workshop on Epi-
demiology & control measures of common air borne
disease incl. smoke fire

5. Financial Support Particulars (Rs)

- i. Registration charges: 2801/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/6/20

S. Gurnjal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

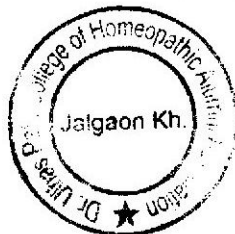
✓ Sanctioned/ Not Sanctioned

Account Department

H. B. Bhandari
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/06/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ulka K Hiray
2. Designation : Lecturer
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop
on Epidemiology and control measure of
Common air borne disease including Swine flu,

5. Financial Support Particulars (Rs)

i. Registration charges: 2801
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/06/2020

Ulka K Hiray
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jaigaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jaigaon Kh.



Date: 18/06/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr Ratna K. Chopade
2. Designation : Lecturer
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on Epidemiology and control measures of common air borne diseases including swine flu

5. Financial Support Particulars (Rs)

- i. Registration charges: 2801
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/06/2020

Chopade
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

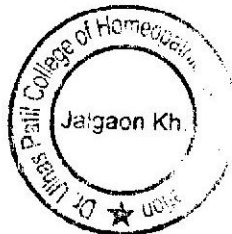
☒ Sanctioned/ Not Sanctioned

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Account Department



Date: 18/06/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Simanchale Sanigrahi
2. Designation : Professor
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
Epidemiology and control measure of common
air borne diseases including swine flu

5. Financial Support Particulars (Rs)

- i. Registration charges: 2801
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 18/06/2020

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

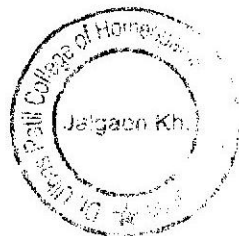
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/6/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Anil V. Parodkar
2. Designation : Lecturer
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on epi-
demiology & control measures of common air borne
disease incl. h1n1 flu

5. Financial Support Particulars (Rs)

- i. Registration charges: 2801/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/6/20

Parodkar
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

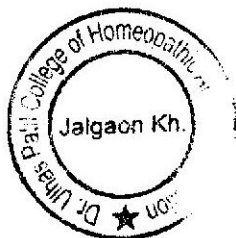
☒ Sanctioned/ Not Sanctioned

Account Department

H. Z. Z. Z.
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/06/2020

Financial Support Request Letter

1. Name of the Staff Member : Dr. Gajanan Dewdas Pawar
2. Designation : Lecturer
3. Department : Case Taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
Epidemiology and Control measure of common
air borne disease including Swine flu,

5. Financial Support Particulars (Rs)

i. Registration charges: 2801
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/06/2020

Pawar
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

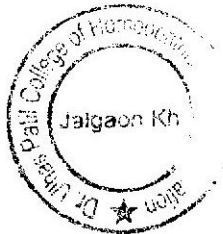
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Hondar
Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/6/20

Financial Support Request Letter

1. Name of the Staff Member : Dr. Swati Sheshrao Sidpur
2. Designation : Lecturer
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on Epidemiology & control measures on common air borne diseases swine flu.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2801/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 18/6/20

Swati
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Bondar
Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 09/07/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bhushan S. Jain
2. Designation : Reader
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Course in
Translational research

5. Financial Support Particulars (Rs)

i. Registration charges: 2475/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 09/07/2019

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal

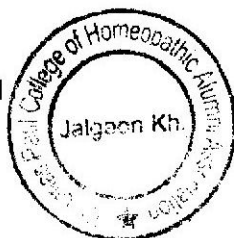
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Account Department

Date:

9/07/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr Sachin D. Patil
2. Designation : Reader
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Course
in Biomedical Research.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2475
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date :

9/07/2019

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

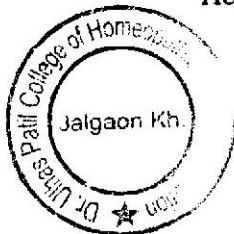
Sanctioned / Not Sanctioned

Account Department

Accountant:

Accountant

Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 7/11/19

Financial Support Request Letter

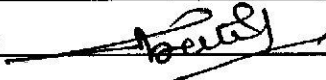
1. Name of the Staff Member : Dr. Atkesh Blehanchand Agrawal
2. Designation : Reader
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on leadership & change management

5. Financial Support Particulars (Rs)

- i. Registration charges: 2350/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 7/11/19

AB Agrawal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

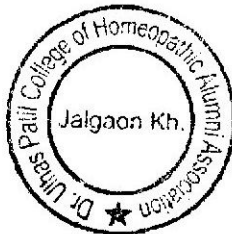
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

H. Banerjee
Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Account Department



Date: 07/11/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sunil J Burase
2. Designation : Professor.
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on Leadership & change Management

5. Financial Support Particulars (Rs)

i. Registration charges: 2350
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 07/11/2019

Sunil J Burase
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

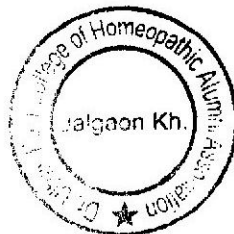
Dr. Dilip B. Patil
Principal
Dr. Uthas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Honour
Accountant:

Dr. Uthas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 7/11/19

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ruprekha G. Sankade
2. Designation : Reader
3. Department : Physiology incl. Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on Leadership & change management

5. Financial Support Particulars (Rs)

- i. Registration charges: 2350/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 7/11/19

Ruprekha Sankade
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

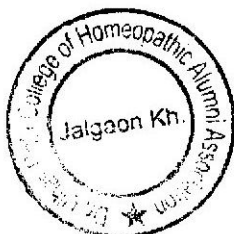
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

H. B. Sankade
Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 07/11/2019

Financial Support Request Letter

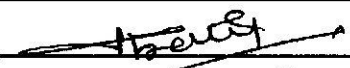
1. Name of the Staff Member : Dr. Suresh . V. Thambare
2. Designation : Reader
3. Department : Case taking & Repetitory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop
on leadership & change Management

5. Financial Support Particulars (Rs)

i. Registration charges: 2350/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 07/11/2019

S. Thambare
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

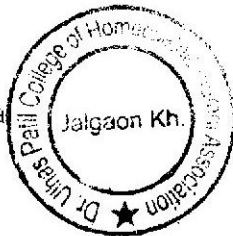
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. Bonare
Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 09/07/2014

Financial Support Request Letter

1. Name of the Staff Member : Dr Dilip B. Patil
2. Designation : Professor / Principal
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic course
in biomedical research

5. Financial Support Particulars (Rs)

i. Registration charges: 2475/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 09/07/2014

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

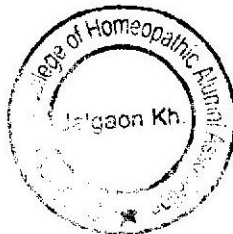
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

[Signature]
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 9/07/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arun V. Patil.
2. Designation : Professor
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic Course in biomedical research.

5. Financial Support Particulars (Rs)

i. Registration charges: 2475
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 9/07/2019 Arjun V. Patil
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

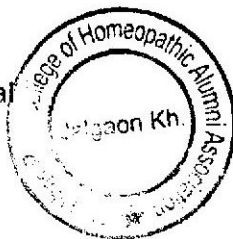
☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Chavhan
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 9/7/19

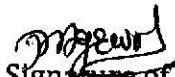
Financial Support Request Letter

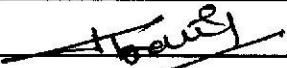
1. Name of the Staff Member : Dr. Madhu Jagdishprasad Agrawal
2. Designation : Professor
3. Department : Hom. materia medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic course in
biomedical research

5. Financial Support Particulars (Rs)

- i. Registration charges: Rs. 2475
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 9/7/19


Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

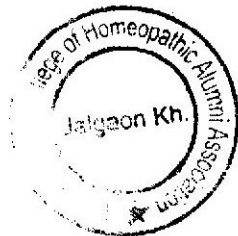
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Honour
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 9/7/19

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bharti M. Bain
2. Designation : Professor
3. Department : Organ of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic course in
biomedical research

5. Financial Support Particulars (Rs)

- i. Registration charges: 2475/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 9/7/19

Bain

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : *Bain*

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H301400
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 09/07/2019

Financial Support Request Letter

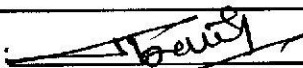
1. Name of the Staff Member : Dr. Vikram Uddhav Dhaneshwar
2. Designation : Reader
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Basic course
in biomedical research

5. Financial Support Particulars (Rs)

i. Registration charges: 2475
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 09/07/2019


Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

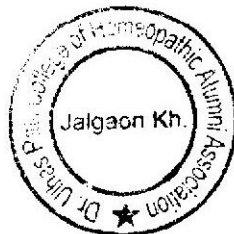
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:
Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/3/19

Financial Support Request Letter

1. Name of the Staff Member : Dr. Swati Sheshrao Sidpur
2. Designation : Lecturer
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking as applied to the art & science of decision making in Homoeopathy: Reflection on role of Reason & Intuition
5. Financial Support Particulars (Rs)
- i. Registration charges: Rs. 2050/-
- ii. Travelling Allowances : _____
- iii. Membership fee : _____
- iv. Other if any : _____

Date: 13/3/19

Swati
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dillip B. Patil

Dr. Dillip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. D. S.
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/03/2019

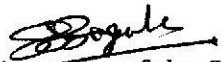
Financial Support Request Letter

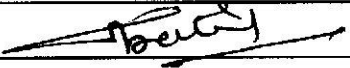
1. Name of the Staff Member : Dr. Sonal S Bagade
2. Designation : Lecturer
3. Department : Pathology & Microbiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking
as applied to the art and science of decision making in
Homoeopathy : Reflections on the Role of Reason & Intuition

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 13/03/2019

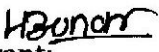

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

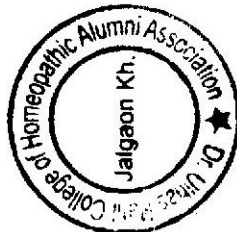
Dr. Dilip B. Patil
Principal
Dr. Uhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant
Dr. Uhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 18/3/2019

Financial Support Request Letter

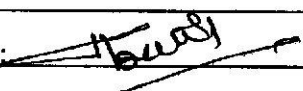
1. Name of the Staff Member : Dr. Sabhita Parveen Yusuf Khan
2. Designation : Professor
3. Department : Community Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking as applied to the art & science of decision making in Homoeopathy : Reflections on the role of reason & intuition.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 18/3/2019

Smm
Signature of the Staff Members

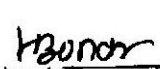
1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/03/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arunesh B Shinde
2. Designation : Lecturer
3. Department : Physiology including Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking as applied to the art and science of decision making in Homoeopathy: Reflection on the role of reason & intuition

5. Financial Support Particulars (Rs)

- i. Registration charges: Rs 2050/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 13/03/2019 [Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. Baner
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/03/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr Manjusha V. Shice
2. Designation : Lecturer
3. Department : Hom Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking
on applied to the art and science of decision making in homopathy
: Reflection on role of reason and intuition

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 13/03/2019

King
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Dr. Dilip B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

W. B. N. D. R.
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/03/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin E. Patil
2. Designation : Lecturer
3. Department : Department of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking as applied to the art and science of decision making in Homoeopathy. Reflections on the Role of Reason & Institution.
5. Financial Support Particulars (Rs)
- i. Registration charges: 2050
- ii. Travelling Allowances : _____
- iii. Membership fee : _____
- iv. Other if any : _____

Date: 13/03/2019

Patil
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 13/3/19

Financial Support Request Letter

1. Name of the Staff Member : Dr. Priyanka A. Lunkead (Gugale)
2. Designation : Lecturer
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : critical thinking
as applied to the art & science of decision making
in Homoeopathy: Reflections on role of reason & intuition

5. Financial Support Particulars (Rs)

- i. Registration charges: Rs. 2050/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 13/3/19

Pagale
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned / Not Sanctioned

Account Department

H. Bonare
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/03/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sayali A Gunjal
2. Designation : Lecturer
3. Department : forensic Medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking as applied to the art and science of decision making in Homoeopathy: Reflections on the Role of Reason & Intuition

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 13/03/2019

SAGunjal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 13/8/2019

Financial Support Request Letter

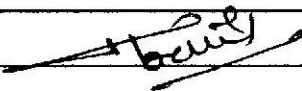
1. Name of the Staff Member : Dr. Ulka K. Hiray
2. Designation : Lecturer
3. Department : Obstetrics & Gynecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Critical thinking as applied to the art & science of decision making in Homoeopathy : Reflection on the role of reason & intuition.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2050/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 13/8/2019

UKHiray
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. B. B. B.
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 7/05/2019

Financial Support Request Letter

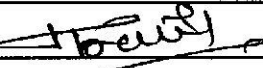
1. Name of the Staff Member : Dr. Ratna K Chapade
2. Designation : lecture
3. Department : surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME productivity enhancement

5. Financial Support Particulars (Rs)

- i. **Registration charges:** Rs. 2010
ii. **Travelling Allowances :** _____
iii. **Membership fee :** _____
iv. **Other if any :** _____

Date : 7/05/2019

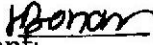
Chapade
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: 

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 07/05/2019

Financial Support Request Letter

1. Name of the Staff Member : Dr Anil. V Piradkar
2. Designation : Lecturer
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : CME Productivity enhancement

5. Financial Support Particulars (Rs)

i. Registration charges: 2010/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 07/05/2019

Piradkar
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : ~~Patil~~

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Bondar
Accountant:

Account Department

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 11/07/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr Dilip B Patil
2. Designation : Professor & Principal
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : International conference on Integrative Oncology

5. Financial Support Particulars (Rs)

i. Registration charges: 2110/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 11/07/2018

H. B. Patil

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : H. B. Patil

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned
☒ Sanctioned

Account Department

H. B. Patil
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 11/07/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Arun Y. Patil
2. Designation : Professor
3. Department : Hom. Pharmacy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP/ Details : International
Conference on Integrative Oncology

5. Financial Support Particulars (Rs)

i. Registration charges: 2110
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 11/07/2018 [Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned
☒

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 11/7/18

Financial Support Request Letter

1. Name of the Staff Member : Dr. Madhu Jagdishprasad Agrawal
2. Designation : Professor
3. Department : Hom. Materia Medica
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : International
Conference on Integrative Oncology

5. Financial Support Particulars (Rs)

i. Registration charges: Rs. 2110/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 11/7/18

[Signature]

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : *[Signature]*

Dr. Dimp B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 11/07/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bharti M Bais
2. Designation : Professor
3. Department : Organon of medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : International
Conference on Integrative Oncology

5. Financial Support Particulars (Rs)

i. Registration charges: 2110/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 11/07/2018

Bais

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : Patil

Dr. Dilip B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

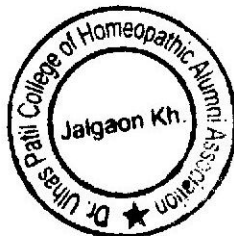
☒ Sanctioned/ Not Sanctioned

Account Department

H. Bhandari
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 11/7/2018

Financial Support Request Letter

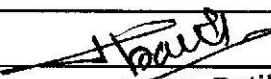
1. Name of the Staff Member : Dr. Vikram Uddhav Dhaneshwar
2. Designation : Reader
3. Department : Anatomy
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : International
conference on Integrative oncology.

5. Financial Support Particulars (Rs)

- i. Registration charges: 2110/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 11/7/2018.


Signature of the Staff Members

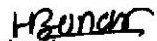
1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dhir B. Patil
Principal

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh



Date: 11/07/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Bhushan S. Jain
2. Designation : Reader
3. Department : Obstetrics & Gynaecology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : International conference on Integrative oncology

5. Financial Support Particulars (Rs)

i. Registration charges: Rs 21101-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 11/07/2018

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 11/07/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sachin P. Patil
2. Designation : Reader
3. Department : Surgery
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : International Conference on Integrative Oncology

5. Financial Support Particulars (Rs)

- i. Registration charges: 2110
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 11/07/2018

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

[Signature] Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Akesh Bishan Chand Agrawal
2. Designation : Reader
3. Department : Teacher of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
life saving and Medical skills - MUKS

5. Financial Support Particulars (Rs)

i. Registration charges: 2250
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date : 28/11/2018

AB Agrawal
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

HBondar
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/18

Financial Support Request Letter

1. Name of the Staff Member : Dr. Sunil J. Buxase
2. Designation : Professor
3. Department : Practice of Medicine
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on life saving & medical skills - MUHS

5. Financial Support Particulars (Rs)

i. Registration charges: Rs. 2250/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 28/11/18

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Ruprekha G. Sankade
2. Designation : Reader
3. Department : Physiology Including Biochemistry
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details: Workshop
on life saving and medical skills - MUHS

5. Financial Support Particulars (Rs)

i. **Registration charges:** 2250
ii. **Travelling Allowances :** _____
iii. **Membership fee :** _____
iv. **Other if any :** _____

Date : 28/11/2018

[Signature]
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

Accountant: [Signature]

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Suresh V. Thombare
2. Designation : Reader
3. Department : Case taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on
Life saving & Medical skills - MUHS

5. Financial Support Particulars (Rs)

- i. Registration charges: 2250/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 28/11/2018

S. Thombare
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : [Signature]

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

[Signature]
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/2018

Financial Support Request Letter

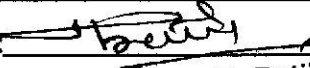
1. Name of the Staff Member : Dr. Indrayan W Badhe
2. Designation : Professor
3. Department : Pathology & Microbiology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop
on life saving & medical skills-MVHI

5. Financial Support Particulars (Rs)

i. Registration charges: Rs 2250/-
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 28/11/2018

AB Badhe
Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

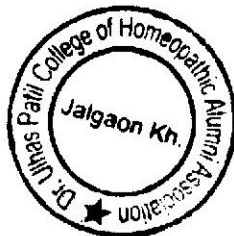
Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department

H. B. Bhandari
Accountant:

Accountant
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/2018

Financial Support Request Letter

1. Name of the Staff Member : Dr. Rishi Manohar Rao Karne
2. Designation : Reader
3. Department : Forensic Medicine & Toxicology
4. Conference/ Publication/ Membership fee/ Workshop/ FDP Details : Workshop on life saving and Medical skills - MUHS

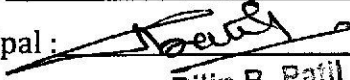
5. Financial Support Particulars (Rs)

i. Registration charges: 2250
ii. Travelling Allowances : _____
iii. Membership fee : _____
iv. Other if any : _____

Date: 28/11/2018

P. Shohani

Signature of the Staff Members

1. Recommendations of the HOD : _____
2. Recommendations of the Principal : 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

Sanctioned/ Not Sanctioned

Account Department

H. Boner
Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.



Date: 28/11/2018

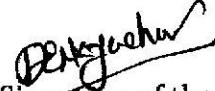
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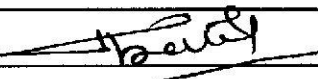
1. Name of the Staff Member : Dr. (Mrs) Nilam Kailas Jadhav.
2. Designation : Professor
3. Department : Case taking & Repertory
4. Conference/ Publication/ Membership fee/ Workshop/ FDP/Details : Workshop on
Life Saving and Medical skills - MUHS

5. Financial Support Particulars (Rs)

i. Registration charges: 2250
ii. Travelling Allowances :
iii. Membership fee :
iv. Other if any :

Date: 28/11/2018

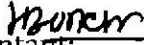

Signature of the Staff Members

1. Recommendations of the HOD :
2. Recommendations of the Principal: 

Dr. Dilip B. Patil
Principal
Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

☒ Sanctioned/ Not Sanctioned

Account Department


Accountant:

Accountant

Dr. Ulhas Patil Homoeopathic Medical
College & Hospital, Jalgaon Kh.

