Personal Information

Salutation :	**Dr**
Teacher First Name :	**POOJA**
Teacher MiddleName Name :	**S**
Teacher SurName Name :	
Teacher's Code Number :	**AYKC02844**
Nature of present appointment :	**Permanent**
Date Of Birth :	**O1/12/1991**
Father Name :	**SURESH KUMAR M D**
Email ID :	**poojasayur@gmail.com**
STD Code :	
Telephone Number :	
Mobile Number :	**9110400675**

Current Address

Address Line 1 :	**#1188/ B ARAVINDA NAGAR**
Address Line 2 :	**4TH CROSS, MYSURU**
State :	**KARNATAKA**
City :	**MYSURU**
Pincode :	**570023**

Permanent Address

Address Line 1 :	**#1677 VIDYA NAGAR,**
Address Line 2 :	**3RD CROSS, MANDYA**
State :	**KARNATAKA**
City :	**MANDYA**
Pincode :	**571401**

Education Details

UG Detail

Name of University	Degree Name	Year of Passing
Rajiv Gandhi University of Health Science,Bangalore.	**BAMS**	**2013**

PG Detail

Name of University	Degree Name	Subjects	Year of Passing
Rajiv Gandhi University of Health Science,Bangalore.	**MD**	**KAYACHIKITHSA**	**2019**

Details of Experience

Name of the college	Designation	From	To
JSS AYURVEDA MEDICAL COLLEGE AND HOSPITAL, MYSURU	**ASSISTANT PROFESSOR**	**24/3/2020**	**TILL DATE**

Current Job Details

Name of state board :	**KAUP**
Department : (Subjects)	**KAYACHIKITHSA**
State Board Registration Number:	**33472**
Designation :	**ASSISTANT PROFESSOR**