Personal Information

1 Cloudan Illiol Illation		
Salutation :	Dr	
Teacher First Name:	KOMALA	
Teacher MiddleName Name:	A	
Teacher SurName Name:		
Teacher's Code Number:	AYKC01388	
Nature of present appointment :	Permanent	
Date Of Birth :	27/03/1988	
Father Name:	ANKAIAH	
Email ID:	Dr.komala2017@gmail.com	
STD Code:		
Telephone Number:		
Mobile Number:	9620713627	
Current Address		

Current Address

Address Line 1:	#465, 7 th main, 5 th cross
Address Line 2:	Alanahalli layout, Mysuru
State:	Karnataka
City:	Mysuru
Pincode:	

Permanent Address

Address Line 1:	#465, 7 th main, 5 th cross
Address Line 2:	Alanahalli layout, Mysuru
State:	Karnataka
City:	Mysuru
Pincode:	

Education Details

UG Detail

Name of University	Degree Name	Year of Passing
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, BANGALORE	BAMS	2011

PG Detail

Name of University	Degree Name	Subjects	Year of Passing
RAJIV GANDHI UNIVERSITY OF	MD	Kaya Chikitsa	2015
HEALTH SCIENCES,			
BANGALORE			

Details of Experience

Name of the college	Designation	From	To
JSS Ayurveda medical college, Mysuru	Asst.Professor in the Dept. of Kayachikista	19/02/2017	24/11/2019
JSS Ayurveda medical college, Mysuru	Asst.Professor in the Dept. of Swasthavritta	25/11/2019	11/02/2021
JSS Ayurveda medical college, Mysuru	Asst.Professor in the Dept. of Kayachikista	12/02/2021	till date

Current Job Details

Name of state board:	KAUP
Department: (Subjects)	Kayachikitsa
State Board Registration Number:	29247

Assistant Professor

Designation: