

PERSONAL INFORMATION

Salutation	:	DR
First Name	:	PUJA
Middle Name	:	
Last Name	:	M S
Teacher's Code	:	
Nature of Present appointment	:	PERMANENT
Current designation	:	ASSISTANT PROFESSOR
Department	:	KAUMARABHRITYA
Registration Number	:	43568
Registration Board	:	KARNATAKA AYURVEDIC AND UNANI PRACTITIONERS BOARD
Date of Birth	:	31/3/1996
Father's / Spouse Name	:	PHANIRAJ Y K
Email id	:	pujams89@gmail.com
Contact Number	:	6360657093

CORRESPONDENCE ADDRESS

Address	:	#387, 3 rd main road, near Karnataka bank, Sardar Vallabhbai Patel Nagar,
City	:	MYSURU
State	:	KARNATAKA
Pin code	:	570028

EDUCATIONAL QUALIFICATIONS

DEGREE	UNIVERSITY	YEAR OF PASSING
UG	Rajiv Gandhi University of Health Sciences, Bangalore	2020
PG - Kaumarabhritya	Rajiv Gandhi University of Health Sciences, Bangalore	2025
PhD	-	
Other	-	

PROFESSIONAL EXPERIENCE

Institution	Designation	From	To
JSS AYURVEDA MEDICAL COLLEGE AND HOSPITAL	Assistant Professor Kaumarabhritya	27/02/2026	TILL DATE