SUBJECT WISE MUHS NASHIK DISTENTION LIST OF STUDENTS

BASIC B.SC. NURSING THIRD YEAR 2020

(WINTER EXAMINATION)

SR. NO.	NAME OF STUDENTS	SUBJECT	DISTENTION MARKS
1	Londhe Collet Philip	Medical Surgical Nursing II	84

BASIC B.SC. NURSING FOURT YEAR 2020

O. NAME OF STUDENTS SUBJECT		DISTENTION MARKS
kar Diksha Sanjayrao	Community Health Nursing II	76
	kar Diksha Sanjayrao	

(WINTER EXAMINATION)

P.B.B.SC. FIRST YEAR 2020 (WINTER EXAMINATION)

SR. NO.	Name of Students	Subject	Distention Marks
-1	Pandey Rani Rajmani	Child Health Nursing	75

BASIC B.SC NURSING SECOND YEAR 2021

(WINTER EXAMINATION)

SR. NO.	NAME OF STUDENTS	SUBJECT	DISTENTION MARKS
1	Bhute Vaishnavi Gunvant	Pharmacology, Pathology and Genetics	76
2	Dhote Sonal tryambakrao	Sociology	86
3	Jadhav Joy Praveen	Sociology	78
4	Lokhande Shivprasad Sanjay	Pharmacology, Pathology and Genetics	75
5	Naik Nitin Nandulkar	Comm Educa Technology	77

M.SC. NURSING SECOND YEAR 2021

(SUMMER EXAMINATION)

SR. NO.	NAME OF STUDENTS	SUBJECT	DISTENTION MARKS
1	Sukanya Pradip Wankhede	Obstetrics and gynecology	78
2	Manisha Yashavant Kharat	Child Health Nursing	77
3	Malhari Ashok Nagre	Medical Surgical Nursing	75
4	Meenu Kumari Dhawal	Mental Health Nursing	77
5	Ritu Rajendra Bhasme	Mental Health Nursing	78
6	Pradhnya Narayanrao Mashram	Mental Health Nursing	76



BASIC B.SC NURSING THIRD YEAR 2022 (SUMMER EXAMINATION)

SR. NO.	NAME OF STUDENTS	SUBJECT	DISTENTION MARKS
1	Shinde Vaishnavi Shamrao	Child Health Nursing	75
2	Debaje Akanksha Manikrao	Child Health Nursing	76
3	Kadam Narayani Umakant	Mental Health Nursing	75
4	Kawale Narayan Uddhav	Mental Health Nursing	78
5	Pachpor Punam Sanjay	Mental Health Nursing	75

P.B.B.SC. FIRST YEAR 2022 (SUMMER EXAMINATION)

SR. NO.	NAME OF STUDENTS	SUBJECT	DISTENTION MARKS
1	Bagul Ashwini Sarkharam	Psychology	78
2	Sherki Ruchika Natthuji	Biochemistry & Biophysics	79
3	Sherki Ruchika Natthuji	Microbiology	84

M.SC. NURSING SECOND YEAR 2022 (SUMMER EXAMINATION)

SR. NO.	NAME OF STUDENTS	SUBJECT	DISTENTION MARKS
1	Jumde Asmita Rajendra	Nursing Administration	78

SCHOOL ON A SERVICE OF THE SERVICE O

Name of the College:- GODAVARI COLLEGE OF NURSING, JALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:- Miss Priyanka Gawai
 Name of The Sport:- Relay Racing Male

Email:-gawandesurendra@gmail.com Email:-gawaipriyanka1993@gmail.com

Mob:-9923311303 Mob:-7875383328

Sr.	Full Name	Name of College	Mobile No.	E-mail ld	Father's Name	Mother's Name	Date of Birth	Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course	V2101G-20115	DATE & YEAR OF FIRST ADMISSION IN	
L	1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSITY	PRESENT	
1	PAWAN SUDHAKAR KOKATE	GODAVARI COLLEGE OF NURSING, JALGAON	9730473494	kokatepawan1999@gmail.com	SUDHAKAR	JAYSHRI	05/11/1999	2017	123/82/2021	B.SC NURSING	SECOND YEAR	4 YEAR	MUHS	B.SC NURSING	
2	SACHIN KHANDU PAWAR	GODAVARI COLLEGE OF NURSING, JALGAON	8766909228	sachinkpawar3286@gmail.com	KHANDU	SHIVKANTA	10-03-2001	2019	09-10-2019	B.SC NURSING	FOURTH YEAR	4 YEAR	MHS	B.SC NURSING	
3	HANUMAN SANTOSH SANAP	GODAVARI COLLEGE OF NURSING, JALGAON	7774806490	hanumansanap777@gmail.com	SANTOSH	KUSUM	10-08-2000	2018	20-09-2019	B.SC NURSING	FOURTH YEAR	4 YEAR	MUHS	B.SC NURSING	

Certified that the above individuals are full time student of this college
 Above information given is true.
 Fill up all information in Capital letters
 Date: 17/09/2022
 Place: Jalgaon

Signature & Name of Principal

Name of the College:-GODAVARI COLLEGE OF NURSING, JALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:-Miss Priyanka Gawai
 Name of The Sport:-Relay Racing Male

Email:-gawandesurendra@gmail.com Email:-gawaipriyanka1993@gmail.com

Mob:-9923311363 Mob:-7875383328

Sr.	Full Name	Name of College	Mobile No.	E-mail Id	Father's Name	Mother's Name	Date of Birth	Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course	DATE & YEAR OF FIRST ADMISSION IN		REMARK
	1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSITY	PRESENT COURSE	
1	PAWAN SUDHAKAR KOKATE	GODAVARI COLLEGE OF NURSING, JALGAON	9730473494	kokatepawan1999@gmail.com	SUDHAKAR	JAYSHRI	05/11/1999	2017	23/02/2021	B.SC NURSING	SECOND YEAR	4 YEAR	MUHS	8.SC NURSING	
2	SACHIN KHANDU PAWAR	GODAVARI COLLEGE OF NURSING, JALGAON	8766909228	sachinkpawar3286@gmail.com	KHANDU	SHIVKANTA	10-03-2001	2019	09-10-2019	B.SC NURSING	FOURTH YEAR	4 YEAR	MHS	B.SC NURSING	
3	HANUMAN SANTOSH SANAP	GODAVARI COLLEGE OF NURSING, JALGAON	7774806490	hanumansanap777@gmail.com	SANTOSH	KUSUM	10-08-2000	2018	20-09-2019	B.SC NURSING	FOURTH	4 YEAR	MUHS	B.SC NURSING	

Certified that the above individuals are full time student of this college .
 Above information given is true.
 Fill up all information in Capital letters
 Date: -17/09/2022
 Place: -Jalgaon



Signature & Name of Principal

Name of the College:-GODAVARI COLLEGE OF NURSING, JALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:-Miss Priyanka Gawai
 Name of The Sport:-Relay Racing Male

Email:-gawandesurendra@gmail.com Email:-gawaipriyanka1993@gmail.com

Mob:-9923311363 Mob:-7875383328

Sr.	Full Name	Name of College	Mobile No.	E-mail Id	Father's Name	Mother's Name	Date of Birth	Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course	DATE & YEAR OF FIRST ADMISSION IN		REMARK
	1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSITY	PRESENT COURSE	
1	PAWAN SUDHAKAR KOKATE	GODAVARI COLLEGE OF NURSING, JALGAON	9730473494	kokatepawan1999@gmail.com	SUDHAKAR	JAYSHRI	05/11/1999	2017	23/02/2021	B.SC NURSING	SECOND YEAR	4 YEAR	MUHS	8.SC NURSING	
2	SACHIN KHANDU PAWAR	GODAVARI COLLEGE OF NURSING, JALGAON	8766909228	sachinkpawar3286@gmail.com	KHANDU	SHIVKANTA	10-03-2001	2019	09-10-2019	B.SC NURSING	FOURTH YEAR	4 YEAR	MHS	B.SC NURSING	
3	HANUMAN SANTOSH SANAP	GODAVARI COLLEGE OF NURSING, JALGAON	7774806490	hanumansanap777@gmail.com	SANTOSH	KUSUM	10-08-2000	2018	20-09-2019	B.SC NURSING	FOURTH	4 YEAR	MUHS	B.SC NURSING	

Certified that the above individuals are full time student of this college .
 Above information given is true.
 Fill up all information in Capital letters
 Date: -17/09/2022
 Place: -Jalgaon



Signature & Name of Principal

Name of the College:- GODAVARI COLLEGE OF NURSING, JALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:- Miss Priyanka Gawai
 Name of The Sport:- Gola Fake Female

Email:-gawandesurendra@gmail.com Email:-gawaipriyanka1993@gmail.com

Mob:-9923311303 Mob:-7875383328

Sr. no.	Full Name	Name of College	Mobile No.	E-mail Id	Father's Name	Mother's Name	Date of Birth	Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course	DATE & YE	AR OF FIRST	REMARK
L	1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSIT	PRESENT	
1	SANSKRUTI PRAMOD SULE	GODAVARI COLLEGE OF NURSING, JALGAON	7828469127	sanskrutisule@gmail.com	PRAMOD	SAVITA	07-08-2002	2020	27-02-2021	B.SC NURSING	SECOND YEAR	4 YEAR	MUHS	B.SC NURSING	

Certified that the above individuals are full time student of this college
 Above information given is true.
 Fill up all information in Capital letters

Date:- 17/09/2022 Place:- Jalgaon

nure & Name of Principal

Name of the College:- GODAVARI COLLEGE OF NURSING, JALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:- Miss Priyanka Gawai
 Name of The Sport:- Bhale Fake Male

Email:-gawandesurendra@gmail.com Email:-gawalpriyanka1993@gmail.com

Mob:- 9923311303 Mob:- 7875383328

Sr. no.	Full Name	Name of College	Mobile No.	E-mail Id	Father's Name	Mother's Name		Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course	The second second second	AR OF FIRST	REMARK
	1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSIT	PRESENT	
1	SHAIKH SAMEER SIKANDER	GODAVARI COLLEGE OF NURSING, JALGAON	7769886588	sameer.igrashahin@gmail.com	SIKANDER	TABASSU	06-10-2000	2019	15-10-2019	B.5C NURSING	FOURTH YEAR	4 YEAR		B.SC NURSING	

Certified that the above individuals are full time student of this college .
 Above information given is true.
 Fill up all information in Capital letters

Date:- 17/09/2022 Place:- Jalgaon



Name of the College: GODAVARI COLLEGE OF NURSING, JALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:- Miss Priyanka Gawai
 Name of The Sport:- Long Jump Female

Email:-gawandesurendra@gmail.com Email:-gawaipriyanka1993@gmail.com

Mob:- 9923311303 Mob:- 7875383328

Sr. no.	Full Name	Name of College	Mobile No.	E-mail id	Father's Name	Mother's Name	Date of Birth	Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course	DATE & YE	AR OF FIRST SSION IN	REMARK
	1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSIT	PRESENT	
1	DIPIKA NARAYAN KOKATE	GODAVARI COLLEGE OF NURSING, JALGAON	9834806788	dipikakokate01@gmail.com	NARAYAN	NALINI	01-01-2001	2019	14-02-2022	B.SC NURSING	FIRST	4 YEAR	MUHS	B.SC NURSING	

Certified that the above individuals are full time student of this college
 Above information given is true.
 Fill up all information in Capital letters

Date:- 17/09/2022 Place:- Jalgaon

Name of the College:- GODAVARI COLLEGE OF NURSING, IALGAON
 Name of the Team Manager: Mr. Surendra Gawande
 Name of The Lady Team Manager:- Miss Priyanka Gawai
 Name of The Sports- Long Jump Male

Email:-gawandesurendra@gmail.com Email:-gawaipriyanka1993@gmail.com

Mob:- 9923311303 Mob:- 7875383328

Full Name	Name of College	Mobile No.	E-mail Id	Father's Name	Mother's Name	Date of Birth	Passing Class XII Exam	Date of First year Admission	Present Course		Duration of The Course	DATE & YE	EAR OF FIRST	REMARK
1	2	3	4	5	6	7	8	9	10	11	12	UNIVERSIT	21.5300000000	
SHIRISHKUMAR HANUMANT MUNDE	GODAVARI COLLEGE OF NURSING, JALGAON	9421886069	shirishmundhe143@gmail.com	HANUMANT	VAISHALI	21-06-2003	2021	17-03-2022	8.SC NURSING	FIRST YEAR	4 YEAR		B.SC	
AMIT SANJAYRAO ITANKAR	GODAVARI COLLEGE OF NURSING, JALGAON	7620114282	amititankar2000@gmail.com	SANJAYRAO	MANGALATAI		2019	31-10-2019	B.SC NURSING	FOURTH	4 YEAR	MUHS	NURSING B.SC NURSING	

Certified that the above individuals are full time student of this college
 Above information given is true.
 Fill up all information in Capital letters

Date:- 17/09/2022 Place:- Jalgaon



(Separate Sheet for Male & Female Students)

Name of the College:- GODAVARI COLLEGE OF NURSING, JALGAON Name of the Game:- BADMINTON

List of Male / Female Participant

Sr.no.	Full Name	Name of College	Mobile No.	E-mail Id	Father's Name	Mother's Name	and the second second	Date & Year of Passing Class XII Exam	Date of First year Admission	Present Course	Present Class	Duration of The Course
1	VYAS SHALEMA MANOHAR	Godavari College of Nursing , Jalgaon	7447873277	yyasshalema@gmail.com	MANCHAR	ELIZABETH	01-08-2003	FEB 2020	31-03-2022	B.SC	FIRST B.SC	-
2	PATEL SAUNDARYA AMIT	Godavari College of Nursing , Jalgaon	8799986932	saundarvapatei915@gmail.com	AMIT	NILIMA	21-12-2002	The state of the s			THE RESERVE AND ADDRESS OF THE PARTY OF THE	
- 2	GOND SANIKA SHAMSUNDAR				The second secon		THE RESERVE OF THE PARTY OF THE		11-03-2022	B.SC	FIRST B.SC	4 YEAR
-	GORD SHIRK SHANSONDAR	Godavari College of Nursing , Jalgaon	7249554919	gondsanika8@gmail.com	SHAMSUNDAR	SUNITA	11-08-2003	2021	11-03-2022	B.SC	FIRST B.SC	4YEAR

Certified that the above individuals are full time student of this college & Date of Birth should be duly certified by Dean / Principal

Date:- 10-08-2022 Place:- Jalgaon



Signature & Name of Sport Teacher

1 10 30 10 -7



Purva Khandash Koshtha Spor Abardu Quantuju

Chaitenya Ayurved Mohavidyaisya

"Cheitanyavan" N.H.No.6, A/p.Sakegaon, Taf.Bhusawat, Dist.Jalgaon, (Maharashtra) - 425201, Mb.No. 8459964934

Web :- camsakegaon.org, E-mail :- ayurvedchaitanya@yahoo.in
Hospital :- Jamner Road, Bhusawal - 97 02582- 240861, 240861

स्पोर्टस/९८ २७५५ २०२२ - २३

दिनाक. ११/१०/२०२२

प्रति, मा.प्राचार्य/अधिष्ठाता,

Godovaci college of Nursing judgeton

विषय :- आंतरविभागीय स्पर्धेसाठी निवड झालेल्या खेळाडू बाबत.

महोदय.

वरील विषयान्वये आपणास कळन् इन्छितो की, आपसे चैतन्य आयुर्वेद महाविद्यालय, साकेगांव- भुसावळ येथे महाराष्ट्र आरोग्य विज्ञान विज्ञान विद्यापीठ, नाशिक अंतर्गत उत्तर महाराष्ट्र विभागीय निवड चाचणी स्पर्धा दिनांक.१० व १९ आक्टोबर २०२२ रोजी पार पडल्या त्यामधुन आपल्या महाविद्यालयातील खालील विद्यार्थ्यांची दि.१४ व १५ आक्टोबर २०२२ रोजी वसंतराव पवार मेडीकल कॉलेज, नाशिक येथे होणा-या आंतर विभागीय स्पर्धेसाठी निवड झालेली आहे. विभागाचा संघ दि १३ आक्टोबर २०२२ रोजी सकाळी ०९,०० वाजता चैतन्य आयुर्वेद महाविद्यालय, साकेगांव- भुसावळ येथून नाशिक येथे रवाना होईल.

Ж.	नाव	खेळ प्रकार		नाव	खेळ अकार
Sh.			Sh.		
8	Sakshi Rakhade	Volleyball		311 al Sorre	Kabadeli
	Krushna Radhod	Fine Hise	8	Prooke Garas (Terms)	Willestall
4	Praya Masure (Ramgen)				Busherhell
15	Shited some	Kho-Kho		Harshy Kumbhar	Kho-kho.
9	Kanchan Timonde	Kabaddi	80		

सम्भियक उत्तर महाराष्ट्र विभाग प्रा. आर.पी.चौधरी



23rd MAHARASHTRA STATE ER-UNIVERSITY SPORTS MEET KRIDA MAHOTSAV-2019



Cert No. PAHSUS/SP/KM-2019/ NO. 001629

This is Certify that Mr./ Ms. CHAVAN NITIN VITTHAL of Maharashtra University of Health Sciences, Nashik participated as player in KHO-KHO(Men / Women) game in the 23rd Maharashtra State Inter-University Sports Meet "Krida Mahostav-2019" organized by Punyashlok Ahilyadevi Holkar Solapur University, Solapur during 26th to 30th December, 2019

Board of Sports & Physical Education

Organising Secretary

PRINCIPAL Organising Chairman GODAVARI COLLEGE OF NURSING JALGAON

