

**Personal Information**

Salutation :	<b>Dr.</b>
Teacher First Name :	<b>USHARANI</b>
Teacher MiddleName Name :	<b>SHYAMASUNDAR</b>
Teacher SurName Name :	<b>SANU</b>
Teacher's Code Number :	ayuks0807
Nature of present appointment :	<b>Regular</b>
Date Of Birth :	24/03/1986
Father Name :	SHYAMASUNDAR
Email ID :	ushasanu@gmail.com
STD Code :	0831
Telephone Number :	3207021
Mobile Number :	9481930824

**Current Address**

Address Line 1 :	C/o.Dr.Sunil.S.Vernekar, Plot No.4, Ward 44,
Address Line 2 :	CCB-318, Opp Dist Traig Institute, Sangameshwar na
State :	Karnataka
City :	Belgaum
Pincode :	590010

**Permanent Address**

Address Line 1 :	C/o.Dr.Sunil.S.Vernekar, Plot No.4, Ward 44,
Address Line 2 :	CCB-318, Opp Dist Traig Institute, Sangameshwar na
State :	Karnataka
City :	Belgaum
Pincode :	590010

**Education Details****UG Detail**

<b>Name of University</b>	<b>Degree Name</b>	<b>Year of Passing</b>
<b>RGUHS Board Bangaluru</b>	<b>BAMS</b>	<b>2009</b>

**PG Detail**

<b>Name of University</b>	<b>Degree Name</b>	<b>Subjects</b>	<b>Year of Passing</b>
<b>RGUHS Board Bangaluru</b>	<b>MD</b>	<b>AYURVEDA SIDHANTA</b>	<b>2015</b>

**Details of Experience**

<b>Name of the college</b>	<b>Designation</b>	<b>From</b>	<b>To</b>
<b>KLEU SHRI B M K AYURVED MAHAVIDYALAYA.BELAGAVI</b>	<b>ASSISTANT PROFESSOR</b>	<b>01/01/2016</b>	<b>Till Date</b>

**Current Job Details**

Name of state board :	<b>KAUP</b>
Department : (Subjects)	<b>Kriya Sharir</b>
State Board Registration Number:	<b>26055</b>
Designation :	<b>Assistant Professor/Lecturer</b>