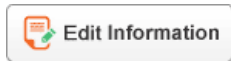




National Commission for Indian System of Medicine

College T...

You can review the information submitted in this College Teaching Staff Details form below before closing.

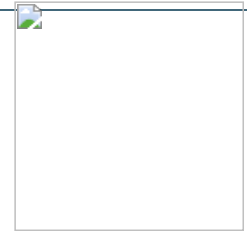


Institution Details

Institution Id : **AYU0052**
 Institution Name : **KLE University Shri.BM Kankanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum**
 Institution Course : **Ayurveda**
 Visitation Id : **A06945**

Personal Information

Part Time Department : **Not Applicable**
 Salutation : **Dr.**
 Teacher First Name : **RAMESH**
 Teacher MiddleName Name : **SHIVAPPA**
 Teacher SurName Name : **KILLEDAR**
 Teacher's Code Number : **AYST00010**
 Nature of present appointment : **Regular**
 Date Of Birth : **23/Jul/1987**
 Father Name : **SHIVAPPA**
 Email ID : **drramesh39@gmail.com**
 STD Code : **0831**
 Telephone Number : **222907**
 Mobile Number : **9035987505**
 Gender : **Male**
 Mother Name : **PARVATI**
 PAN Number : **CPCPK5955B**



Current Address

Address Line 1 : **Plot No. 18 Banashankari Nilaya**
 Address Line 2 : **Near Gangadhar Colony Bus Stop, Shindolli**
 State : **Karnataka**
 City : **Belagavi(Belgaum)**
 Pincode : **591302**

Permanent Address

Address Line 1 : **3038/1A, BANASHANKARI NILAYA, RAMAPUR SITE**
 Address Line 2 : **CHIDAMBARESHWAR GUDDAD ONI, SAUNDATTI**
 State : **Karnataka**
 City : **Belagavi(Belgaum)**
 Pincode : **591126**

Education Details

UG Qualification

State/UT from where the qualifying degree was obtained : **KARNATAKA**
 Name of University/Board or medical Institution : **Rajiv Gandhi University of Health Sciences, Bangalore**
 Name of Institution : **DGM, JSVV Samsthe's Danappa Gurushiddapa Melmalagi
 Ayurvedic Medical College, Hospital & PG Research Centre**
 Name of the obtained recognized Medical Qualification : **Ayurvedacharya (Bachelor of Ayurvedic Medicine & Surgery)**
 Nomenclature of qualification : **B.A.M.S.**
 Year of Passing : **2009**

PG Qualification

PG Qualification 1

PG Degree/PG Diploma : **M.S.**
 State from which Addl. Degree obtained : **KARNATAKA**
 Name of the University : **KLE University, Belgaum - KLE Shri B.M. Kankanawadi Ayurveda
 Mahavidyalaya, Belgaum**
 Institution Name : **KLE University Shri.BM Kankanawadi Ayurveda Mahavidyalaya
 Post Graduate Studies and Research Centre Belgaum**
 Specialization : **Ayurveda Dhanvantri - M.S. (Shalya)**
 Year of Passing : **2014**

Additional Qualification

Additional Qualification 1

PG Degree/PG Diploma : **Ph.D.**
 State from which Addl. Degree obtained : **KARNATAKA**
 Name of the University : **KLE University, Belgaum - KLE Shri B.M. Kankanawadi Ayurveda
 Mahavidyalaya, Belgaum**
 Institution Name : **KLE University Shri.BM Kankanawadi Ayurveda Mahavidyalaya
 Post Graduate Studies and Research Centre Belgaum**
 Specialization : **Shalyatantra**
 Year of Passing : **2025**
 Topic of PhD : **Efficacy of Alabu raktamokshana and shamana oushadhi in the
 management of Non Specific low back pain**
 Mode of Study : **Part time**

Details of Experience

Name of the college	Department(Subject)	Designation	From	To
kanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum	Shalyatantra + (Ksharsutra Lab.)	Assistant Professor/Lecturer	13/Sep/2014	28/Jan/2019
kanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum	Shalyatantra + (Ksharsutra Lab.)	Assistant Professor/Lecturer	29/Jan/2019	22/Dec/2021
kanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum	Prasuti & Stri Roga	Associate Professor/Reader	23/Dec/2021	21/Oct/2024
kanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum	Shalyatantra + (Ksharsutra Lab.)	Associate Professor/Reader	22/Oct/2024	15/Apr/2026
kanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum	Shalyatantra + (Ksharsutra Lab.)	Professor	16/Apr/2026	Till Date

No

Current Job Details

Name of state board : **Karnataka Ayurvedic & Unani Practitioner's Board,
Bangalore, Karnataka**

Department : **Shalyatantra + (Ksharsutra Lab.)**

(Subjects)

State Board Registration Number: **28020**

Designation : **Professor**

From Date : **16/Apr/2026**

Bank Account Details

Salary Account Number : **004002300001177**

Name of Bank & Branch : **BZRCMS BELAGAVI**

Uploaded Documents

- Please click here. to download UG certificate**
- Please click here. to download PG certificate**
- Please click here. to download experience certificates**
- Please click here. to download certified copy of Form 16 (Part-A & Part-B)/26AS**
- Please click here. to download the Additional Degree certificate**
- Please click here. to download registration certificate**
- Please click here. to download copy of Appointment order**
- Please click here. to download certified copy of Salary paid bank Statement of last one Year.**
- Please click here. to download copy of Promotion Order**
- Please click here. to download documents related to ESIC**
- Please click here. to download documents related to PPF**

 **Print Submitted Data**