

**Professional Teaching Experience Certificate for Fellowship/Certificate Courses  
Director/Mentor**

Title of the Course applied for:-

This to Certify that Dr. Shilpa Kulkarni..... has worked in the Department of Pediatric Neurology & Epilepsy..... Training Centre as per following details


**A) General Experience**

Designation	From	To	Total period Year/Months	
Asst. Professor	2001	2007	5 YEARS	9 MONTHS
ASSOC. Professor	2007	2014	7 YEARS	
Advt. Professor	2014	Till date	8 YEARS.	


**B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-**

Designation	From	To	Total period Year/Months	
Asst. Professor	2001	2007	5 YEARS	9 MONTHS
ASSOC. Professor	2007	2014	7 YEARS	
Advt. Professor	2014	Till date.		

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)

  
Sign & Stamp  
Head of the Department  
Date 20/05/2022

**DR. SHILPA KULKARNI**  
Paediatric Neurology

  
Sign & Stamp  
Dean/Principal/Head of Institute  
Date 20/05/2022

**DR. SHAKUNTALA S. PRABHU**  
MD, DCH, FRCPCH (LONDON)  
REG No 57833  
PROFESSOR & MEDICAL DIRECTOR  
B. J. WADIA HOSPITAL FOR CHILDREN



Wadia Hospitals

Tel No : 24126003/9809/24185669

**BAI JERBAI WADIA HOSPITAL FOR CHILDREN**  
Acharya Donde Marg, Parel, Mumbai - 400 012.

Ref. No. Certi/2022-05/ 01

Dt: 20/05/2022

**To whomsoever it may concern**

This is to certify that **Dr. Shilpa Kulkarni** is working as **Additional Professor** in Department of Pediatrics & Division of Pediatrics Neurology & Epilepsy at Bai Jerbai Wadia Hospital for Children. Her position and work experience is as follows,

Ad hoc Lecturer: -	20 <sup>th</sup> October 2001 till July 2003
Regular Lecturer -	August 2003 to July 2007.
Ad hoc Associate Professor -	August 2007 to July 2011
Regular Associate Professor -	20 <sup>th</sup> July 2011 to 20th July' 2014.
Additional Professor -	21 <sup>st</sup> July' 2014 to till date.

Dr. Shakuntala Prabhu  
Medical Director & Professor  
Dept. of Paediatric & Paediatric Cardiology  
Bai Jerbai Wadia Hospital for Children



Self Attested  
SOP

**Professional Teaching Experience Certificate for Fellowship/Certificate Courses  
Director/Mentor**

Title of the Course applied for:-

This to Certify that Dr. Anaita Udwadia Hegde..... has worked in the Department of Pediatrics, Neurology & Epilepsy..... Training Centre as per following details


**A) General Experience**

Designation	From	To	Total period Year/Months	
Asst. Professor	1994	1999	5 YEARS	


**B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-**

Designation	From	To	Total period Year/Months	
Consultant Paediatric Neurologist	1999	Till date	23 YEARS.	

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)

  
Sign & Stamp  
Head of the Department  
Date 20/05/2022

**DR. SHILPA KULKARNI**  
Paediatric Neurology

  
Sign & Stamp  
Dean/Principal/Head of Institute  
Date 20/05/2022

**DR. SHAKUNTALA S. PRABHU**  
MD, DCH, FRCPCH (LONDON)  
REG No 57833  
PROFESSOR & MEDICAL DIRECTOR  
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**BAI JERBAI WADIA HOSPITAL FOR CHILDREN**  
Acharya Donde Marg, Parel, Mumbai - 400 012.

Ref.No.Certi/2022-05/ 63

Dt: 20/05/2022

**To whomsoever it may concern**

This is to certify that **Dr. Anaita Udawadia - Hegde** working as a **Consultant Pediatric Neurologist** in Department Pediatrics Neurology & Epilepsy at the Bai Jerbai Wadia Hospital for Children. Her position and work experirnce is as follows,

Lecturer: -	June 1995 to November 1999
Clinical Assistant:-	December 1999 to 2001
Consultant Pediatric Neurologist: -	August 2001 to till date

Dr. Shakuntala Prabhu

Medical Director & Professor

Dept. of Paediatric & Paediatric Cardiology

Bai Jerbai Wadia Hospital for Children

**Professional Teaching Experience Certificate for Fellowship/Certificate Courses  
Director/Mentor**

Title of the Course applied for:-

This to Certify that Dr. Payal Rajendra Shah has worked in the Department of Pediatric Neurology & Epilepsy Training Centre as per following details


**A) General Experience**

Designation	From	To	Total period Year/Months	
Senior Resident.	2010	2012	1 year	4 mth.
Asst Prof	2012	2015	3 year.	5 mth


**B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-**

Designation	From	To	Total period Year/Months	
• Fellow	Aug 2016	July 2017	1 year	
• Sr. Clinical Asso.	Sept 2017	July 2019	3 year.	
• Observer	Aug 2019	Dec 2019		4 mth
• Consultant.	Jan 2020	til date.	2 year	3 mth.

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)

  
 Sign & Stamp  
 Head of the Department  
 Date 20/05/2022

**DR. SHILPA KULKARNI**  
 Paediatric Neurology

  
 Sign & Stamp  
 Dean/Principal/Head of Institute  
 Date 20/05/2022

**DR. SHAKUNTALA S. PRABHU**  
 MD, DCH, FRCPCH (LONDON)  
 REG No 57833  
 PROFESSOR & MEDICAL DIRECTOR  
 B. J. WADIA HOSPITAL FOR CHILDREN



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# BAI JERBAI WADIA HOSPITAL FOR CHILDREN

Acharya Donde Marg, Parel, Mumbai - 400 012.

Ref. No. Certi/2022-05/ 64

Dt: 20/05/2022

## To whomsoever it may concern

This is to certify that **Dr. Payal Rajendra Shah** working as **Sr. Consultant** in Department of Pediatric Neurology & Epilepsy at the Bai Jerbai Wadia Hospital for Children. Her work experience and position is as follows,

Part Time Consultant : 15<sup>th</sup> Jaunary 2020 to 3<sup>rd</sup> October' 2021

Sr. Consultant : 04<sup>th</sup> October 2021 to till date

Dr. Shakuntala Prabhu

Medical Director & Professor

Dept. of Paediatric & Paediatric Cardiology

Bai Jerbai Wadia Hospital for Children

Sc/H attested  
T.R. Shah



## Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for:-

This to Certify that Dr. VARSHASHI SUPAN GAVALI has worked in the Department of PEDIATRIC NEUROLOGY, B.J. WADIA HOSPITAL FOR CHILDREN Training Centre as per following details

### A) General Experience

Designation	From	To	Total period Year/Months	
			Year	Months
ASSISTANT PROFESSOR	22/10/2018 1/05/2019	31/07/2019 30/11/2021	3 years	1 month
CONSULTANT	1/12/2021	Till Date	—	5 month

### B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-

Designation	From	To	Total period Year/Months	
			Year	Months
ASSISTANT PROFESSOR	22/10/2018	30/11/2021	3 years	1 month
CONSULTANT	1/12/2021	Till Date	—	5 month

Fellowship April 2016 May 2018 2 years —  
(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)



Sign & Stamp  
Head of the Department  
Date 20/05/2022

**DR. SHILPA KULKARNI**  
Paediatric Neurology



Sign & Stamp  
Dean/Principal/Head of Institute  
Date

**DR. SHAKUNTALA S. PRABHU**  
MD, DCH, FRCPCH (LONDON)  
REG No 57833  
PROFESSOR & MEDICAL DIRECTOR  
B. J. WADIA HOSPITAL FOR CHILDREN



Wadia Hospitals

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**BAI JERBAI WADIA HOSPITAL FOR CHILDREN**  
Acharya Donde Marg, Parel, Mumbai - 400 012.

Ref. No. Certi/2022-05/ 62

Dt: 20/05/2022

**To whomsoever it may concern**

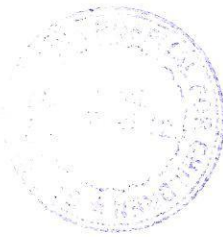
This is to certify that **Dr. Vrushabh Gavali** has worked as **Assistant Professor** in Department of Pediatrics & Division of Pediatric Neurology & Epilepsy from 22<sup>nd</sup> October 2018 to 31<sup>st</sup> July' 2019 (Adhoc) & Regular from 1<sup>st</sup> August 2019 to 30<sup>th</sup> November 2021 with executive Responsibility of Pediatric Neurology patients at the Bai Jerbai Wadia Hospital for Children. He is currently working as Fulltime Consultant in Division of Pediatrics Neurology & Epilepsy from 1<sup>st</sup> December 2021 to till date.

Dr. Shakuntala Prabhu

Medical Director & Professor

Dept. of Paediatric & Paediatric Cardiology

Bai Jerbai Wadia Hospital for Children



Self Attested