

## Information of Mentor of Training Centre

It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: PRADNYA SUHAS BENDRE
02.	Date of Birth	: 14.09.1965
03.	Address	: 303, Shagun Ganesh Near Ganandpada Fire St, MUMBAI 400081
04.	Tel. No./ Mob. No.	: 9324567237
05.	e-mail id	: suhaspradnya@yahoo.com
06.	Nationality	: INDIAN
07.	Qualification in details : (attach documentary proof)	: M.B., B.S., M.S., M.Ch. D.N.B
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: LIST ATTACHED
09.	Present Appointment	: PROFESSOR
10.	Publications (List & Proof)	: LIST ATTACHED
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 20yrs 9 months
12.	Any other relevant information	: -

Date: - 20/5/22

*Pradnya Bendre*

Name & Sign. of Mentor

**For the use of affiliated Training Center:**

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

*Pradnya Bendre*  
Sign & Stamp  
Head of the Department  
Date: 20/05/22

**DR. PRADNYA BENDRE**  
Paediatric Urology



Training Centre Round Seal

*Shakuntala S. Prabhu*  
Sign & Stamp  
Dean/ Principal/ Director of Training Centre  
Date: 20/05/2022

**DR. SHAKUNTALA S. PRABHU**  
MD, DCH, FRCPC (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/2022-05/05

Dt:20/05/2022

### To Whomsoever It May Concern

This is to certify that **Dr. Pradnya S. Bendre** working as Professor in Department of Pediatric Surgery & in Division of Pediatric Urology at the Bai Jerbai Wadia Hospital for Children. She has worked as Assistant Professor since 14/6/2003 to 30/6/2007 and became Associate Professor from 01/04/2007 to 16/09/2012. At present she is working as Professor from 17/09/2012 to till date.

Dr. Shakuntala Prabhu

Medical Director & Professor

Dept. of Paediatric & Paediatric Cardiology

Bai Jerbai Wadia Hospital for Children





ANNEXURE - "F"

**Information of Mentor of Training Centre**  
It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: Dr. PARAG J. KARKERA
02.	Date of Birth	: 20-02-1980
03.	Address	: B/18 Jeevan Rachna CHS, V.P. Road, Andheri(W), Mumbai-58
04.	Tel. No./ Mob. No.	: 9930105878
05.	e-mail id	: drpaggy@gmail.com
06.	Nationality	: INDIAN
07.	Qualification in details : (attach documentary proof)	: M.B.B.S. M.S. D.N.B. (C.SURG) M.Ch.(Ped Surg)
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: LIST ATTACHED
09.	Present Appointment	: PROFESSOR
10.	Publications (List & Proof)	: LIST ATTACHED
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 9yrs
12.	Any other relevant information	: -

Date: - 20/5/22

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

*Parag*

Name & Sign. of Mentor

Dr. Parag Karkera

*Pradnya Bendre*

Sign & Stamp  
Head of the Department  
Date: 20/5/22

DR. PRADNYA BENDRE  
Paediatric Urology



Training Centre Round Seal

*Sb*

Sign & Stamp  
Dean/ Principal/ Director of Training Centre  
Date: 20/6/22

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/ 06

Dt: 20/05/2022

### To Whomsoever It May Concern

This is to certify that **Dr. Parag Karkera** working as **Professor** in Department of Paediatric Surgery & Paediatric Urology at the Bai Jerbai Wadia Hospital for Children. His position & work experience is as follows;

Assistant Professor : 01/04/2013 (Locum) and Regular from 01/04/2014 to 18/05/2016

Associate Professor : 19/05/2016 to 07/07/2021

Professor : 08/07/2021 to till date.

Dr. Shakuntala Prabhu

Medical Director & Professor

Dept. of Paediatric & Paediatric Cardiology

Bai Jerbai Wadia Hospital for Children





## Information of Mentor of Training Centre

It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	RAJAN GARC
02.	Date of Birth	04-01-1985
03.	Address	B J Wadia Hospital
04.	Tel. No./ Mob. No.	9729 440 8910
05.	e-mail id	rajangarc1985@gmail.com
06.	Nationality	Indian
07.	Qualification in details : (attach documentary proof)	- MBBS, MCh Pedt. Surg.
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	LIST ATTACHED
09.	Present Appointment	1yr contract as Sr. Consultant
10.	Publications (List & Proof)	LIST ATTACHED
11.	Post Graduate Teaching experience (Attach documentary evidence)	-
12.	Any other relevant information	-

Date: - 19/5/22

Name & Sign. of Mentor

**For the use of affiliated Training Center:**

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Sign & Stamp  
Head of the Department  
Date: 20/05/22

DR. PRADNYA BENDRE  
Paediatric Urology



Training Centre Round Seal

Sign & Stamp  
Dean/ Principal/ Director of Training Centre  
Date: 20/05/22

DR. SHAKUNTALA S. PRABHU  
MD, DCH, FRCPC (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/ 07

Dt: 20/05/2022

**To Whomsoever It May Concern**

This is to certify that **Dr. Rajan Garg** working as **Sr. Consultant** in Department of Paediatric Surgery & Paediatric Urology at the Bai Jerbai Wadia Hospital for Children from 01/09/2021 to till date.

Dr. Shakuntala Prabhu

Medical Director & Professor

Dept. of Paediatric & Paediatric Cardiology

Bai Jerbai Wadia Hospital for Children

Rajan  
19.5.22

