# FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 2023-2024.

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection	:	

### Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Oral Implantology	2021-2022	10	Dr. Amit Benjamin (9323031872) Dr. Shreyas Gupte (9819583044) Dr. Saloni Mistry (9821020083) Dr. Kavita Pol (9820618812) Dr. Harshal Suryavanshi (9764595557) Dr. Omkar Shete (9823599550)

(Attach separate List if necessary)

## 2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
2017-2018	ORAL IMPLANTOLOGY	10	10 (TEN)
2018-2019	ORAL IMPLANTOLOGY	10	10 (TEN)
	ORAL IMPLANTOLOGY	10	10 (TEN)
		10	04 (FOUR)
		10	10 (TEN)
		Certificate Course  2017-2018 ORAL IMPLANTOLOGY  2018-2019 ORAL IMPLANTOLOGY  2019-2020 ORAL IMPLANTOLOGY  2020-2021 ORAL IMPLANTOLOGY	2017-2018   ORAL IMPLANTOLOGY   10

Professional/Teaching Experience Certificate for Fellowship Courses Director/Mentor

Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that Dr. Meghna Vandekar - Dean, Director has worked in the Department of Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

	RAL EXPERIENCE : Name of Institution	From	То	TOTAL
Position	Name of institution	110		N/A
Tutor			04.00.04	29 DAYS
Lecturer/Asst.	Government Dental	03.08.01 10.09.01	31.08.01 08.10.01	29 DAYS
Professor	College &Hospital. Mumbai	12.02.02	05.02.03	1 YRS
	Widifibai	11.02.03	08.02.04	1YRS
		01.03.04	27.02.05	1 YRS
		01.03.05	20.04.05	20 DAYS
Reader	Terna Dental College & Hospital, Navi	24.04.06	31.08.07	1 YEARS 4 MONTH 6 DAYS
	Mumbai	04.04.05	18.08.05	3 MONTH 28
/Associate Professor	Government Dental College &	21.04.05	10.00.03	DAYS
Floiessoi	Hospital, Mumbai Government Dental	20.08.05	17.12.05	3 MONTH
	College & Hospital, Y.M.T. Dental College	01.09.07	30.09.2010	28DAYS
	& Hospital, Navi Mumbai			3 YRS 1 MONTH
Professor	Y.M.T. Dental College & Hospital, Navi Mumbai	01.10.2010	Till Date	12YRS 4 MONTH
Dean/Principal  B) Actu	Y.M.T. Dental College & Hospital, Navi	24.09.2018	Till Date	4YRS 4 MONTH

Designation	From	То	Total period Year /Month
Director	24.09.2018	Till Date	4yrs 4 Month
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(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship Course)

Sign & Stamp

**Head of the Department** 

Sign & Stamp

Dean/Principal/Head of Institute



Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

ymtden@yahoo.com

**Q** 022-27744429

Ref No. YMTDC 641 2023

Date: 14/02/2023

#### **EXPERIENCE CERTIFICATE**

This is to certify that Dr. Meghna Vandekar, M.D.S. Orthodontics is working in this institution as a Dean, Professor & HOD in the department of Orthodontics and also working as a Director in the department of Fellowship Course of Oral Implantology from 24.09.2018 till to date.

Dr. G.D.POL Chairman

DR. G. D. POL CHAIRMAN DR. G.D. POL. FOUNDATION Institute and Sector- 4, Kharghar, Nav. Sumbar 110 210.

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DEAN Y.M.T. Dental College Institutional Area, Sector -4, kharghar, Navi Mumbai - 410 210

Professional/Teaching Experience Certificate for Fellowship Courses Director/Mentor

Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that **Dr. Amit Benjamin - Professor & HOD** has worked in the Department of Periodontology & Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

A) GENERAL Position	Name of Institution	From	То	TOTAL
	Y.M.T. DENTAL COLLEGE & HOSPITAL	12.05.2006	16.05.2009	3 YR 1 MON.
LECTURER	DR.D.Y.PATIL DENTAL COLLEGE	18.05.2009	18.06.2009	1 MON
	Y.M.T. DENTAL COLLEGE	02.07.2010	01.08.2010	1 MON
Asso. Professor	DR.D.Y.PATIL DENTAL COLLEGE	19.06.2009	21.05.2010	11 MON
/Reader	Y.M.T.DENTAL COLLEGE	02.08.2010	30.11.2015	5 YRS 4 MONTHS
Professor	Y.M.T.DENTAL COLLEGE	01.12.2015	TILL DATE	7 Yrs 2 Month
B) Actual I	Experience in the s	ubject of concern	ned Fellowship C	ourse
Position	Name of Institution	From	То	TOTAL
Coordinator	YMT Dental College	01/02/2019	Till Date	4Yrs

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

Sign & Stamp

Head of the Department

Sign & Stamp
Dean/Principal/Head of Institute

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Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

vmtden@yahoo.com

**3** 022-27744429

Ref No. 7MTDC/643/2023

Date: 14/02/2023

### **EXPERIENCE CERTIFICATE**

This is to certify that Dr.Amit Benjamin, M.D.S. Periodontics is working in this institution as a Professor in the department of Periodontics and also working as a Co-Ordinator in the department of Fellowship Course of Oral Implantology from 01.02.2019 till to date

Dr. Meghna Vandekar DEAN

Y.M.T. Dental College Institutional Area, Sector -4, kharghar, Navi Mumbai - 410 210

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Y.M.T. Dental College Institutional Area, Sector -4, kharghar, Navi Mumbai - 410 210

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@dentalymt@gmail.com

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Professional/Teaching Experience Certificate for Fellowship Courses Director/Mentor

Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that **Dr. SHREYAS GUPTE – PROFESSOR & HOD** has worked in the Department of Oral & Maxillofacial Surgery & Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

A) GENE	RAL EXPERIENCE	1 -	Т.	Total period
Designation	COLLEGE NAME	From	То	Year /Month
	YMT Dental college	21.02.2002	07.06.2002	3 Mon 17 days
Lacturar	SMBT Dental College	01.11.2004	17.01.2008	3yrs 2mon.
Lecturer	Sinhagad Dental College & Hospital	10.06.2008	30.11.2008	17 Days 5 MON. 20 DAYS
Reader	Sinhagad Dental College & Hospital	01.12.2008	20.01.2011	2 yrs. 1 mon. 20 DAYS
reader	YMT Dental college	21.01.2011	30.06.2015	4 yrs 5 month
Professor	YMT Dental College	01.07.2015	Till Date	7 Yrs.7 Month
B) Actua	al Experience in the subject o	f concerned Fo	ellowship Co	urse
Designation	COLLEGE NAME	From	То	Total period Year /Month
PROFESSOR & Head of the Department	Y.M.T. DENTAL COLLEGE	01.02.2014	TILL DATE	9 yrs

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

Sign & Stamp

**Head of the Department** 

Sign & Stamp

Dean/Principal/Head of Institute

DEAN



Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

ymtden@yahoo.com

022-27744429

Ref No. YMITDC 645/2023

Date: 14/02/2023

### **EXPERIENCE CERTIFICATE**

This is to certify that Dr. Shreyas Gupte, M.D.S. Oral & Maxillofacial Surgery is working in this institution as a Professor & Head in the department of Oral & Maxillofacial Surgery and also working in the Fellowship Course of Oral Implantology from 01.02.2014 till to date

Dr. Meghna Vandekar DEAN

DEAN Y.M.T. Dental College Institutional Area, Sector -4, kharghar, Navi Mumbai - 410 210

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Professional/Teaching Experience Certificate for Fellowship Courses Director/Mentor

### Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that **Dr.SALONI MISTRY – PROFESSOR & HOD** has worked in the Department of Prosthodontics & Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

A) GENERA Position	Name of Institution	From	То	TOTAL
LECTURER	Nair Hospital Dental College	20/01/2000	31/07/2003	3yrs 6 month
Asso. Professor	Terna Dental College & Hospital	01/08/2003	31/05/2008	4yrs 10 month 7 Month
/Reader	Terna Dental College & Hospital			0 11
	Terna Dental College & Hospital	01/01/2009	30/11/2018	9 yrs 11 month
Professor	Y.M.T. Dental College, Kharghar, Navi Mumbai	01/12/2018	Till Date	4Yrs 2 Month
B) Actual	Experience in the	subject of concern	ned Fellowship Co	ourse
Position	Name of Institution	From	То	TOTAL
Mentor	YMT Dental College	01/02/2019	TILL DATE	3YR.9 MONTH

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

Sign & Stamp

Head of the Department

Sign & Stamp

Dean/Principal/Head of Institute



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ymtden@yahoo.com

022-27744429

Ref No. YMTDC 647 2023

Date: 14/02/2023

### **EXPERIENCE CERTIFICATE**

This is to certify that Dr.Saloni Mistry, M.D.S. Prosthodontics is working in this institution as a Professor & Head in the department of Prosthodontics and also working in the Fellowship Course of Oral Implantology from 01.02.2019 till to date.

Dr. Meghna Vandekar DEAN

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@dentalymt@gmail.com

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Professional/Teaching Experience Certificate for Fellowship Courses Director/Mentor

Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that **Dr. Kavita Pol – Professor** has worked in the Department of Periodontology & Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

A) GENE Position	RAL EXPERIENCE : Name of Institution	From	То	TOTAL
Lecturer	Y.M.T. DENTAL COLLEGE NAVI MUMBAI MUHS UNIVERSITY	02.07.2010	01.07.2014	4 YRS.
Reader	YMT DENTAL COLLEGE NAVI MUMBAI MUHS UNIVERSITY	02.07.2014	31.12.2019	5 Yrs 6 Month
Professor	YMT DENTAL COLLEGE NAVI MUMBAI MUHS UNIVERSITY	01.01.2020	Till Date	3 Yrs. 1 Month
B) Actu	al Experience in the sub	ject of concerne		
Designation	From	То	Total period \	ear /Month
Mentor	01.02.2014	Till Date	9 Yrs	

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

Sign & Stamp

**Head of the Department** 

Sign & Stamp

Dean/Principal/Head of Institute

Y.M.T. Dental College

& Hospital Kharghar, Navi Mumba - 410 210



Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

ymtden@yahoo.com

@ 022-27744429

Ref No. YMTDc/642/2023

Date: 14/02/2023

### **EXPERIENCE CERTIFICATE**

This is to certify that Dr. Kavita G. Pol, M.D.S. Periodontics is working in this institution as a Professor in the department of Periodontics and also working in the Fellowship Course of Oral Implantology from 01.02.2014 till to date.

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Dr. Meghna Vandekar DEAN

> DEAN Y.M.T. Dental College & Hospital Kharghar, Navi Mumba: - 410 210

DEAN Y.M.T. Dental College Institutional Area, Sector -4, kharghar, Navi Mumbai - 410 210

Professional/Teaching Experience Certificate for Fellowship Courses Director/Mento

Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that **Dr. OMKAR SHETE- Reader** has worked in the Department of Prosthodontics & Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

	A) GENERAL EXPERIENCE			
Position	Name of Institution	From	То	TOTAL
LECTURER	Y.M.T.DENTAL COLLEGE & HOSPITAL, KHARGHAR, NAVI MUMBAI	01.10.2011	30.06.2016	4 YRS 9 MONTH
READER	Y.M.T.DENTAL COLLEGE & HOSPITAL KHARGHAR, NAVI MUMBAI	01.07.2016	Till Date	6 Yrs. 7 Month
	B) Experience in the subject	of concerned	Fellowship	Course
Position	Name of Institution	From	То	TOTAL
MENTOR	Y.M.T. DENTAL COLLEGE &HOSPITAL	01/02/2019	TILL DATE	4YRS

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

Sign & Stamp
Head of the Department

Sign & Stamp

Dean/Principal/Head of Institute

DEAN



Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

ymtden@yahoo.com

@ 022-27744429

Ref No. YMTDC/644/2023

Date: 14/02/2023

### **EXPERIENCE CERTIFICATE**

This is to certify that Dr.Omkar Shete, M.D.S. Prosthodontics is working in this institution as a Reader in the department of Prosthodontics and also working in the Fellowship Course of Oral Implantology from 01.02.2019 till to date. Mardela

DEAN

Y.M.T. Dental College Institutional Area,

Sector -4, kharghar, Navi Mumbai - 410 210 Shils

Dr. Meghna Vandekar DEAN

Professional/Teaching Experience Certificate for Fellowship Courses Director/Mentor

#### Title of the Course applied for :- Fellowship Course of Oral Implantology

This is to certify that **Dr. HARSHAL SURYAVANSHI** – Reader has worked in the Department of Oral Maxillofacial Surgery & Oral Implantology at Dr.G.D.Pol Foundation Y.M.T. Dental College & Hospital as the following details.

ATTACHE A) GENI	ERAL EXPERIENCE :			
Designation	COLLEGE NAME	From	То	Total period Year /Month
Lecturer	Shaan Education Society's Guardian of Dental Sciences & Research Centre, Ambarnath	20/06/2011	03/10/2011	3 mon. 14 days 4 yrs 1 month
	YMT Dental College & Hospital	04/10/2011	30/11/2015	27 days
Reader	YMT DENTAL COLLEGE	01/12/2015	Till Date	7 Yrs 2 Month
B) Actu	al Experience in the subject of	concerned Fe	llowship Cou	rse
Designation	COLLEGE NAME	From	То	Total period Year / Month
Mentor	Y.M.T. DENTAL COLLEGE	01/02/2014	Till Date	9 yrs

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

Sign & Stamp Sign & Stamp

Head of the Department

Dean/Principal/Head of Institute

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Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

ymtden@yahoo.com

① 022-27744429

Ref No. YMTDC/646/2023

Date: 14/02/2023

#### **EXPERIENCE CERTIFICATE**

This is to certify that Dr. Harshal Suryavanshi, M.D.S. Oral & Maxillofacial Surgery is working in this institution as a Reader in the department of Oral & Maxillofacial Surgery and also working in the Fellowship Course of Oral Implantology from 01.02.2014 till to date

Dr. Meghna Vandekar DEAN

MoNandelaa

Y.M.T. Dental College & Hospital Khargher, Navi Mumba - 410 210

H. N. J.

Y.M.T. Dental College Institutional Area, Sector -4, kharghar, Navi Mumbai - 410 210

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@ dentalymt@gmail.com

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