

FACULTY INFORMATION

Name : Dr. Jyotirling Siddappa Savle
Date of Birth & Age : 07-07-1985 (31 yrs 3 M)
Present Designation : Asst.Lecture
Department : Pathology
College : M.R.Medical College,
City : Kalaburagi
Residential Address of : Dr.Jyotirling Siddappa Savle,
H.No. 9-12-642/1 2nd Cross
Vidya Nagar Colony,
Bidar – 585 403.
Contact particulars : E-Mail-Address jyotirlingsavle@gmail.com
: Mobile No. 8792704701
Date of joining present Institution : 19-02-2016 as Asst. Professor
Qualification. : MBBS. MD (Pathology)



Qualification	College	University	Year	Registration of UG & PG with date	Name of the State Medical Council
<u>MBBS</u>	JNMC Belgaum	RGUHS	2008 August	86333 11.01.2010	KMC
<u>MD Pathology</u>	Shri.B.M Patil Medical College, Vijayapur	(Bijapur)BLDE Uni.	2015 April	86333 30.05.2015	KMC

Details of the previous appointments/teaching experience.

Designation	Department	Name of the Institution	From DD/MM/YY	To DD/MM/YY	Total Experience In years & months
Assistant Professor		M.R.Medical College, Kalaburagi	19.02.2016	Till Date	9 Months

Achievements :

Awards :

Guest Speaker :

Paper presentation :

National :

International :-

State :-

Others :-

Poster presentation

Publications :

01. Indexed

02. Non Indexed

03. Original Article

04. Case report

Other specify :