

## FACULTY INFORMATION

Name : Dr. APURVA.A.B  
Date of Birth & Age : 17.06.1986 (30)  
Present Designation : ASSISTANT PROFESSOR  
Department : PAEDIATRICS  
College : M.R.MEDICAL COLLEGE  
City : KALABURAGI



Residential Address of employee : . Dr.Apurva.A.B. D/o Ashok Binjawadagi.

H.NO-8-1306/10/2/2. Gunj Road,Near Anakal Petrol  
Pump Gandhi nagar.Kalaburgi.

Contact Particulars : Tell(office) : 08472-220307

E-mail address : apurvabinjawadgi@gmail.com

Mobile Number : 9986881110

Date of Joining present institution : **11.11.2014** as **Assistant Professor**

Qualifications: MBBS

Qualification	College	University	Year	Registration No.of UG & PG with date	Name of the state Medical Council
MBBS	M.R.M.C	R.G.U.H.S	2010	87321 23.03.2010	KMC
MD	M.R.M.C	R.G.U.H.S	2013	87321 23.03.2013	KMC

Details of the previous appointments/teaching experience

Designation	Department	Name of Institution	From	To	Total Experience in years& Months
ASST.PROF	PAEDIATRICS	M.R.M.C	11.11.2014	Till date	2 Yr.1 M

**Achievements** :

**Awards** :

**Guest Speaker** :

**Paper Presentation** :

**1. National** :

**2. International** :

**3. State** :

**4. Others** :

**Poster Presentation** :

**Publications** :

**1. Indexed** :

**2. Non Indexed** :

**3. Original Article** :

**4. Case Report** :

**Other specify**