

Maharashtra University of Health Sciences, Nashik  
Inspection Committee Report for Academic Year 202 --- - 202---  
Attendance Details/ Research Details/ Welfare Scheme Details

Facult : Physiotherapy

Name of College/Institute Late BHaiyyasaheb GHoprpade Institutu of Physiotherapy Masur

1	Attendance	} Month-wise Biometric attendance to be uploaded by the college on College Website  (No hard copies of attendance to be submitted to the University)
	Teaching Staff	
	Non-teaching staff	
	Hospital Staff	
	UG & PG Students	
2	Project	YES
	Research Articles/Publications	NO
	Research Award (Student/Teacher)	NO
3	<b>Utilization of Student Welfare Schemes :-</b>	
	Earn and Learn Scheme	No
	Dhanwantri Vidyadhan Scheme	NO
	Sanjivani Student Safety Scheme	NO
	Student Safety Scheme	No
	Book Bank Scheme	NO
	Savitribai Phule Vidyadhan Scheme	
	Bahishal Shikshan Mandal Scheme	
4	<b>Sport participants/Other Activities:</b>	
	i) Information of Student(s) who participated University level & State level Avishkar Competition.	
	ii) Information of Student(s) who participated in Regional Sport Competition & State level Sports Competition.	YES Throw ball national Champion ship 1)Karan Govekar 2)Sourabh Nikam 3) Siddhi Badapure 4)Dhanshree Patil
	iii) Information of Student(s) who participated in Cultural Activities.	Yes
	iv) Does the college have NSS Unit?	No
5	Whether "Swaccha Bharat Abhiyan" implemented in college	Yes



*B. S. Prajudeen*  
7/6/2023  
Dean/ Principal Stamp & Signature

Principal  
Late Bhaiyyasaheb Ghorpade Institute  
of Physiotherapy, Malwadi (Masur),  
Tal. Karad, Dist. Satara

To,

The Principal

Late. Bhaiyyasaheb Ghorpade institute of physiotherapy

Malwadi, Masur.

**Report of Goa Visit for national Throw ball Championship**

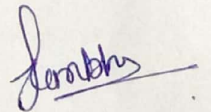
Sir,

My self along with 4 student 1<sup>st</sup> year & 2<sup>nd</sup> year BPTH visit to for national championship the event was inclusive of eight matches of boys & girls of college level.

We won boys title & were runner-up for the girl's titles. Games for were held for two days the authorities done accommodation for entire event. Overall its motivation & learning experience for all of us.

We all are thankful for giving us precious experience.

Thanking you,



Yours Faithfully



B. S. Rajudeen  
03/08/2023  
Principal

Late Bhaiyyasaheb Ghorpade Institute  
of Physiotherapy, Malwadi (Masur),  
Tal. Karad, Dist. Satara



FORM 6

THE PATENTS ACT, 1970

(39 of 1970)

&

THE PATENTS RULES, 2003

CLAIM OR REQUEST REGARDING ANY CHANGE IN APPLICANT OR PATENT

[See sections 20(1), 20(4) and 20(5); rules 34(1), 35(1) and 36(1)]

1. Insert the name in full. The family principal name in the beginning if the applicant is a natural person.

(a) DR.PRASANNAJEET PRAMOD NIKAM  
an Indian National having address  
Department of Sports Physiotherapy,  
Krishna Institute of Medical  
Sciences, Near Dhebewadi Road  
Malkapur, Karad, Maharashtra, Pin  
Code: 415110

2. Insert the complete address including postal index number/code and state and Country

(b) DR. AISHWARYA INDRAJEET  
BULBULE, an Indian National having  
address Department of Neuro  
Physiotherapy, Faculty of  
Physiotherapy, Krishna Vishwa  
Vidyapeeth (Deemed to be  
University), Karad-415110,  
Maharashtra, India

3. Insert the nationality.

4. State the name of the applicant(s)  
For patent

hereby request that the application  
for patent No. **202221033169**  
dated **June 09, 2022** made by  
DR.PRASANNAJEET PRAMOD NIKAM  
the applicant(s) may  
proceed in our name and further  
request direction of the Controller, if  
necessary be made in that effect.

Reasons for making the above request  
are as follows:

**Change of ownership from**

DR.PRASANNAJEET PRAMOD NIKAM

**to DR.PRASANNAJEET PRAMOD**

NIKAM; AND DR. AISHWARYA

INDRAJEET BULBULE

**5. Original and certified copies of the**

Documents shall accompany the claim  
or request. Consent by the legal  
representative of the deceased joint  
applicant shall be filed whenever  
required

**6. Insert details of the documents.**

We furnish the following document(s) in  
support of our above request:

**Deed of Assignment (Original)**

**7. Complete address including postal  
Index number/code and state along  
With Telephone and Telefacsimile  
Number(s).**

**Our address for service in India is:**

Lex-Regia

246, Gandhi Nagar, Nagpur-440010

Maharashtra, India

Email: mailbox@lexregia.in

royak777@gmail.com

Mob: +91-7774064118

Dated this 07<sup>th</sup> day of July, 2023

**8. To be signed by the applicant(s) or**

authorized registered patent agent.

*Arghya Roy*

**9. Name of the natural person who has  
Signed.**

Arghya Ashis Roy (IN/PA 2346)



To,  
The Controller of Patent  
The Patent Office,  
At Mumbai

Note: For fee: See first schedule



B. Prasad  
31/08/2023  
Principal  
Late Bhaiyyasaheb Ghorpade Institute  
of Physiotherapy, Malwadi (Masur),  
Tal. Karad, Dist. Satara