



CURRICULUM VITAE

PERSONAL DETAILS

1. **Name** : Mr.Nilesh Hari Waghmare
2. **Permanent Address** : A/P/ Yashwant Colony Ichalkaranji
Tal- Hatkanangale, Dist. Kolhapur.
Pin Code -416 115
3. **Designation** : Assistant Professor (C.H.B.)
4. **Qualification** : M.Sc.Chemistry
5. **Mobile Number** : **9860049146**
6. **e-mail** : Nileshwa98@gmail.com
7. **Vidwan Id** :
8. **Date of Birth** : 12 March 1989
9. **Gender** : Male

EDUCATIONAL QUALIFICATION:

Degree /Qualification	School/ College/Institute	Board/ University	Passing Year	Class & Percentage	Specialization
Ph.D.	-----	-----	-----	-----	-----
M.Sc.	Shivaji University Kolhapur	Shivaji University Kolhapur	2013	First Class 60.78 %	Applied Chemistry
B.Sc.	D.K.A.S.C.College, Ichalkaranji	Shivaji University Kolhapur	2011	First Class 60.25 %	Chemistry
HSC	Kailaswasi Sardar Shamrao Ligade Junior College, Akola	Maharashtra State Board Of Secondary and Higher Secondary Education.Pune	2006	First Class 67.67%	Science

SSC	Dr.Bapuji Salunkhe Highschool Ichlkaranj	Maharashtra State Board Of Secondary and Higher Secondary Education.Pune	2006	Second Class 46.53%	Science, Social Science, Maths & Languages
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1. **Ph.D. thesis title :**
2. **Guide's Name :**
3. **Research Specializations :**
4. **Awards /Achievements : _____**
5. **Date of recognition as PG teacher (if applicable) : _____**
6. **Date of recognition as Research Guide (if applicable): _____**
7. **Number of students completed M.Phil. /Ph.D. degree under your supervision: ____**
8. **Number of Research Students currently working under your supervision : _____**
9. **Teaching Experience:**

UG level: 10 years 9 months.

PG level: _____1__years ____months

Sr. No.	Designation / Post held	Name of the College / Institute	Nature of appointment	Period		Experience in Years
				From	To	
1.	Assistant Professor	D.K.A.S.C. College, Ichalkaranji	C.H.B.	2013	Till date	10
Total						10

10. Experience in this College: 10 years 9 months

11. Research Articles Published : (Write number here)

Total citations: (Google scholar)

h-index:(Google

scholar)Link to the Google scholar account:

Sr. No.	Title of paper	Name of the author/s	Department of the teacher	Name of journal	Year of publication	ISSN	Link to the recognition in UGC enlistment of the Journal /Digital Object Identifier (doi) number		
							Link to website of the Journal	Link to article / paper / abstract of the article	Is it listed in UGC Care list
1.	-----	-----	-----	-----	-----	-----	-----	-----	-----

12. Number of books and chapters in edited volumes/books published and papers published in national/ international conference proceedings:

Sr. No.	Title of the book/chapters published/ Title of the paper	Title of the proceedings of the conference	Name of the conference	National / International	Year of publication	ISBN	Affiliating Institute at the time of publication	Name of the publisher
1.	-----	-----	-----	-----	-----	-----	-----	-----

13. Details of Workshop/ Seminar/ Conference/ Symposia Attended/ Participated/ Presented:

National:

International:

Sr. No.	Name of conf., workshop, seminar, symposia	Date	Level	Role (Attended, presented, participated)
13.	University Level Workshop National Education Policy 2020: Challenges Before Colleges and Teachers	2020	National	Participated

14. Lectures Delivered at Workshop/ Seminar/ Conference/ Symposia and other as Resource Person :

Sr. No.	Name of conf., workshop, seminar, symposia	Date	Level	Role (Attended, presented, participated)
1	-----	-----	-----	-----

15. Projects ongoing/completed

Sr. No.	Name of the research project/ endowment	Name of the Principal Investigator/Co-investigator	Department of Principal Investigator	Year of Award	Amount Sanctioned	Duration of the project	Name of the Funding Agency
1.	-----	-----	-----	-----	-----	-----	-----

16. Details of teachers undergoing Faculty Development Programmes, Professional Development Programmes, Orientation / Induction Programmes, Refresher Course, Short Term Course / Certificate Course (MSCIT, TALLEY, JAVA, MOOCS) etc.)

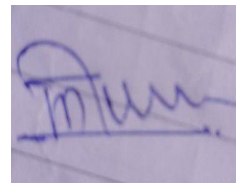
Sr. No.	Title of the program	Duration (from – to) (DD-MM-YYYY)
1	-----	-----

17. Membership of Institutional /Professional bodies:

18. DECLARATION:

I hereby declare that all information in this document is true, complete and correct to the best of my knowledge and belief.

Place: Ichalkaranji



Signature

(Name- Nilesh H. Waghmare)