

Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for:-

This to Certify that Dr. Lakshmi Vas (MBBS, M.D. DA) has worked in the Department of Anesthesia, Wadia Children's Hosp. Training Centre as per following details
Mumbai

A) General Experience

Designation	From	To	Total period Year/Months	
Head of Department	1-5-1982	4-7-2000	18	years

B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-

Designation	From	To	Total period Year/Months	
Director of Ashirvad Institute for Pain management & Research	2005	till date	20	years

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

Lakshmi Vas
Sign & Stamp
Head of the Department
Date

ASHIRVAD INSTITUTE FOR
PAIN MANAGEMENT AND RESEARCH
505, Kohinoor Square, Shivaji Park
N.C. Kelkar Marg, Dadar (West)
Mumbai - 400 028

Lakshmi Vas
Sign & Stamp
Dean/Principal/Head of Institute
Date

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