



**National Health Mission, Health Department Z. P. Latur**

**Name of Post: Yog Teacher (AYUSH) (Category :- Open-4)**

**आक्षेपानंतरची अपात्र यादी दि. १९/०६/२०२४**

Sr. no.	Form No.	Name of the Candidate	Applied Category	Bank Name	D D No.	Amount Rs.	Date of Birth (DD-MM-YY)	Educational Qualification (योग प्रशिक्षक हा नामांकित योग संस्थेचे नांव)	Qualification Marks			50% Of Marks obtained	Higher Additional Qualification (PG Degree etc)	Higher Qualification Mark (Max. 20)	Govt Experience Only	Experience Mark (Per Year 6 Mark, Max.30)	Eligible Yes / No	Remarks	Objection Remark	Total Marks (29=21+23+25)	Eligible Yes / No	
									Final Year Total Marks	Mark Obtain	%											
1	2	3	10	11	12	13	14	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
1	7	Sulabha anand apsange	OBC	online		100	8/Jan/79	45YEARS,0MONTHS,21DAYS	ITI Authaentic Yoga certificate Attached			0.00	0.00	No	0	No	0	No	Age Bard & Only Yog Teacher order Attachad		0.00	No