

Dayanand Education Society's

Dayanand Science College, Latur

PERSONAL DETAILS

Name: Swarup Shivraj Gavkare

Date of Birth: 28/03/1998

Phone: 7798053969

E-Mail: swarup.gavkare@gmail.com



JOB DESCRIPTION

Unique ID:

Position: Assistant Professor

Date of Appointment: 01.07.2023

Date of retirement:

Department: Biotechnology

Post Graduation:

Type of Association(Yes/No)

1. Permanent Faculty: No

2. CHB: No

3. Adjunct Faculty (Contract): Yes

4. Visiting Faculty: No

EDUCATION QUALIFICATION

Degree	Institute	University	Year of passing	Grade / percentage
Ph.D.	-	-	-	-
M.Phill	-	-	-	-
NET	-	-	-	-
SET	-	-	-	-
M. Sc. ()	Dayanand Science College, Latur	SRTMUN	2022	89.00 %
B.Ed.	-	-	-	-
B. Sc.	Dayanand Science College, Latur	SRTMUN	2020	81.00 %
HSC	Dayanand Science College, Latur	MSBSHSE	2016	70.00 %
SSC	Maharashtra Vidyalaya, Killari	MSBSHSE	2014	90.40 %

WORK / TEACHING EXPERIENCE

Department	Institute/college	University	Tenure/ duration
Biotechnology	Dayanand Science College, Latur	SRTMUN	01 Year

COURSES TAUGHT

Department	Institute/college	University	Papers taught
	Dayanand Science	SRTMUN	Introduction To Biotechnology
Distribusions	College, Latur		Advance Cell Biology
Biotechnology			Environmental Biotechnology
			Nano Biotechnology

	Food Biotechnology
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INDUSTRY EXPERINCE

1. No Experience

OTHERS EXPERINCE

1. Guest Lecturer at Latur College of Physiotherapy, Hasegaon

RESEARCH EXPERINCE

- 1. A
- 2. B
- 3. C
- 4. D
- 5. F
- 6. H ADD AS PER YOUR REQUIREMENT

RESEARCH GUIDANCE

Sr. No	Name of Students	Research Topic	Joining Date	Completed Date

AREA OF SPECIALIZATION

AREA OF SPECIALIZATION:

PROJECTS CARRIED OUT

Sr. No.	Project Title	Major/	Funding Agency	Fund	Date of	
51.140.	Troject Title	Minor	runuing Agency	Received	Completion	

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PATENTS FILLED & GRANTED

Sr. No.	Title of Invention	Publication Date	Granted Date	Application No	National / International
-	-	-	-	-	-
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RESEARCH PUBLICATION NO OF PAPERS PUBLISHED

Sr. No.	Name of Authors	Title of the paper	Year of publication, Name of Journal, Volume & Page Nos.	Referred or Non Referred	ISBN / ISSN No.	Level (Int./ Nat./ State/ Local)	Impact Factor	Active Link
1	2	3	4	5	6	7	8	9
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BOOK PUBLICATION

Sr. No.	Name of Authors.	Publication	Title of the book	Year of publicatio	ISBN / ISSN No.	Level (Int. / Nat. / State. / Local)
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BOOK CHAPTER PUBLICATION

Sr. No.	Name of Authors.	Title of Chapter	Year of publication	ISBN / ISSN No.	Level (Int. / Nat. / State. / Local)
1	2	3	4	5	6
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CONFERENCE / WORKSHOP / SEMINAR ATTENDED

Sr. No	Workshop	Date	Sponsored	Organized BY
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ORIENTATION AND REFRESHER COURSE

1. A

2. B

3. C

4.

TECHNOLOGY TRANSFER (USE OF ICT)

1. A

2. B

3. C

4.

FACULTY DEVELOPMENT PROGRAM ATTENDED

1. Yes.

INVITED AS RESOURCE PERSON / INVITED TALKS

1. Guest lecturer at Latur college of physiotherapy.

AWARDS AND ACHIEVMENTS

• As a mentor received National Level third prize in calendar making competition organized by MSI

ADMINISTRATIVE TASK DONE

1.			
2.			
3.			

OTHER CO-CURRICULAR ACTIVITIES.

1. 2.

ADDRESS:

Residential

At. Post Killari - 413516 Ta. Ausa Dist. Latur

Official

At. Post Killari - 413516 Ta. Ausa Dist. Latur