VIVEK COLLEGE OF AYURVEDIC SCIENCES & HOSPITAL, BIJNOR

Academic (2026-27) Time Table	3rd Prof. B.A.M.S	Batch 2023-24	w.e.f. 03/11/2026			
TIME	**MONDAY**	**TUESDAY**	**WEDNESDAY**	**THURSDAY**	**FRIDAY**	**SATURDAY**
9:15 am – 11:15 am	NLHP	NLHP	NLHP	NLHP	NLHP	NLHP
11:15 am – 12:00 Pm	Dr. Akriti / Dr. D.M. KB/ LH	Dr. Arti KB/ LH	DR. S.S./Dr. MLS/Dr. A.A./ Dr. P.T./ Dr. M.D. KC / NLHT/LH	Dr. Adil KC / LH	Dr. S.S KC / LH	Dr. H.P. PK / LH
12:00 am – 01:00 pm	Dr. Rounak SLK/ LH	Dr. Jyoti SLK/ LH	Dr. R.V./Dr. S.T./ Dr. Sarita/ Dr. N.R. SA / NLHT/LH	Dr. R.V./Dr. S.T./ Dr. Sarita/ Dr. N.R. SA / NLHT/LH	Dr. Kusum/ Dr. Archana PTSR / LH	Dr. M.L.S. KC / LH
1:00 pm -1:30 pm	**LUNCH – BREAK**					
1:30 pm – 2:30 pm	Dr. Pratibha KC / LH	Dr.S.P /Dr. D.K. PK / LH	Dr. Madhumita KC / LH	Dr.Mohini PTSR / LH	Dr.Sachchidananad KB/ LH	Dr.Mansa Devi PTSR/ LH
2:30 pm – 3:30 pm	Dr. Mallika PK / LH	Dr. Sachin ST/ LH	Dr. Dheeraj ST / LH	Dr. Nancy ST / LH	Dr. Rounak/ Dr. Jyoti SLK / LH	Dr. Preeti ST / LH
3:30 pm - 4:15	Dr. Rounak/ Dr. Jyoti SLK / NLHT	Dr. K.S./ Dr.M.S.D. /Dr. A.S./ Dr. M.U. PTSR / NLHT	Dr. D.K.S./ Dr.D.K. Dr. M.S./Dr. H.P. PK / NLHT	Dr. A.M./ Dr.S.Y. /Dr. A.G./ Dr. D.M. KB / NLHT	Dr. D.M./ Dr.P. /Dr. N/ Dr. S. ST / NLHT	Dr. S.S../ Dr. MLS. /Dr. A.A./ Dr. P.T./ Dr. M.D. KC / NLHT

Abbreviation

Dr. Sachchidanand	SY	Dr. Devarakonda S.P	DKS	Dr. Preeti	P	Dr. Sarita	S.S.
Dr. Arti Mal	AM	Dr. Dharmendra	DK	Dr. Nancy	N		
Dr. Akriti Gupta	AG	Dr. Mallika Singh	MS	Dr. Dheeraj Mohan	DM		
Dr. Santilata Sahoo	SS	Dr. Harpreet Singh	HP	Dr. Ratheesh V.	RV		
Dr. Mahalakshmi	MLS	Dr. Adil Ansari	AA	Dr. Nisha Raina	NR		
Dr. Kusum Singh	KS	Dr. Pratibha Thakur	PT	Dr. Mohini Upreti	MU		
Dr. Mansa Devi	MSD	Dr. Madhumita Das	MD	Dr. Dipratna D. More	DDM		
Dr. Archana Singh	AS	Dr. Sachin Thapliyal	ST	Dr. Shalini Tiwari	ST		

If classes are not conducted regularly as per the official timetable, or if a designated faculty member is found to be consistently absent, students are encouraged to report the matter. Please submit your grievance to **president.marbism@ncismindia.org**, including your Full Name and Enrollment/Roll Number. **(Rest assured the identity of the complainant and the details of the report will be kept strictly confidential).**

3.11.26

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