

**Name:-SHINDE PRAVIN LAXMAN**

**Address(Optional):-**

**Personal Details:-**

<b>Name</b>	<b>SHINDE</b>	<b>PRAVIN</b>	<b>LAXMAN</b>
	<i>SURNAME</i>	<i>FIRST NAME</i>	<i>MIDDLE NAME</i>
<b>Department</b>	<b>GEOGRAPHY</b>		
<b>Designation</b>	<b>ASST.PROF.</b>		
<b>Qualification(s)</b>	<b>M.A., B.Ed, NET</b>		
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**Area of Interest in Research:**

**Population Geography**