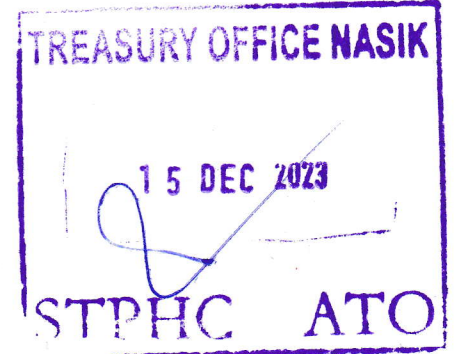


महाराष्ट्र MAHARASHTRA

© 2023 ©

82AA 406964



DECLARATION

I, **Dr. Balasaheb Laxman Ghule** Principal of the **Sindhutai Vikhe Patil College of Nursing, A/p. Chincholi, Tal- Sinnar, Dist. Nashik** solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website along with all Annexure is true and correct to the best of my knowledge. The said information is provided to me by the concerned teachers and duly verified by me. It is further submitted the teacher's information attached in respective **Annexure- IV & VII** are not working in / at any other College / Institute or presented themselves at any inspection for the Academic Year 2024-2025 as per my knowledge and information provided by the concerned teachers. The teachers in the **Annexure-VI & VII** are staying in the same city/town /village where the College/Institute is situated or adjacent to the city / town / village, where the College/Institute is situated and having the valid proof of residence of the said city / town / village. The teachers in the

जोडपत्रा-१

फक्त प्रतिज्ञापत्रासाठी (अनुच्छेद-४)

सदरचे मुद्रांक हे साठेखत, करारनामा, विसारपावती, भागिदारी पत्र, उसनवार पावती या कारणासाठी वापरता येणार नाही.

प्रतिज्ञापत्रा कोणाकडे सादर करावयाचे :

सिंधुताई विखे पाटील कॉलेज ऑफ नर्सिंग

प्रतिज्ञापत्रासाठीचे कारण :

विवाह

मुद्रांक विकत घेणाऱ्याचे नांव व रहिवासी पत्ता :

डॉ. बाळासाहेब लक्ष्मण घुले

मु. सं. चिंचोली मा. वि. चिंचोली

मुद्रांक विक्री बाबतची नोंद वही अनु.क्रमांक व दिनांक : 20022/99/9/1/2024

मुद्रांक विकत घेणाऱ्याची सही :

परवाना क्रमांक - ८७/१९५/२६
मेघदुत शॉपिंग सेंटर, सी.बी.एस. नाशिक

ज्या कारणासाठी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून सहा महिन्यात वापरणे बंधनकारक आहे.

Annexure- VI & VII are not practicing in College working hours or out-side the City where the College / Institute is situated.

I am further hereby declaring that every information or contents in this Inspection Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same is/are absolutely true and correct. If at any stage it is revealed that any information or content given in this declaration is not true and correct, in such event the undersigned/ the concerned teacher as the case may be, shall be liable for disciplinary action or penal action or Affiliation of the College shall be withdrawal, as the case may be.

This declaration is voluntarily signed by me on 18/01 day of 2024 at the Sindhutai Vikhe Patil College of Nursing A/p. Chincholi, Tal- Sinnar, Dist.Nashik

Date: 18 / 01 /2024

Place: Chincholi,



Signature of Principal

Dr. Balasaheb Laxman Ghule

Principal

(With Seal of the College of Nursing Chincholi, Sinnar Nashik-422102)