



महाराष्ट्र MAHARASHTRA

2024

DD 128494

30 JAN 2025

क्र. 46578 दि. / / 2022 रु. 500/- पेकी
मिळकत कोणाकडे सादर करावयाचे कुठेही करिता
मुद्राक घेणाऱ्याचे नांव प्रधान्याच परिचय शिक्षण सांस्था आडगाव
दस्तचा प्रकार प्रमाणपत्र दस्त नोंदणी करणार का-होय/नाही
दु.निबंधक कार्यालय-नाशिक / इतर मोबदला रक्कम
दुसऱ्या पक्षकाराचे नांव: _____
मिळकत वर्णन: _____

TREASURY OFFICE NASHIK
28 JAN 2025
STIPULATO

दस्त राजेंद्र प्रतापराव मोहन
ही Bqee

अथ. डी. शिंदे स्टॅम्प बक.
कार्ड आयार, नाशिकरी
सांख्यिक नं. 22-99

ANNEXURE-XVI

DECLARATION

I, the Dean / Director/ Principal, M.V.P. Samaj's Institute of Nursing Education, Adgaon, Nashik solemnly states an 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 my knowledge & Belief. The said information is provided to me by the concerned teachers and duly verified by me. It is further submitted the teachers information attached in respective Annexure- XIII (A) & (B) 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- XIII (A) & (B) 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 **Annexure- XIII (A) & (B)** are not practicing in College working hours or out-side the City where the College /Institute is situated.

Infrastructure Required as per MSR and Indian Nursing Council Norms is available and we have own building for Nursing Institute or Required Specified Constructed Area as per Norms Laid by Authorities for College and Hostel as per Intake capacity and further No Other Nursing Colleges Running in Same campus or In Same Building

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.....day of20.....at.....

Date: / /2025

Place: Nashik




Signature of Dean/Principal Name of
the Signatory-

(With Seal of the College/Institute)