

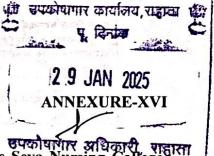


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## DECLARATION

I, the Principal of the Sakhar Kamgar Hospital Trusts Seva Nursing Co

Shrirampur 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 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-VII & VIII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2025-26 as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure-VII & VIII are staying in the same city / town where the College / Institute is situated or adjacent to the city / town, where the College is situated and having the valid proof of residence of the said city / town. The teachers in the vill are not practicing in College working hours or out-side the City ollege Anstitute is situated.

NOTED & REGISTERED AT SERIAL NO. 245

ज्या कारणासाठी ज्यांनी मुद्रांक खरेटी केना त्यांनी त्याच कारणासाठी मुद्रांक खरेटी केन्यापासून ६ महिन्यात वापरणे audaita mi. नुदाक विकत घेणाऱ्याची सही मुद्रांक विकत घेणाऱ्याचे नाव मुदाक विकी नोंद वही अनुक्रमांक / दिनांक हस्त असन्यास त्यांचे नाव व पत्ता मोबदमा रक्कन परवानाधारक मुद्रांक विकेत्याची सही व परवाना क्रमांक तसेच मुद्रांक विकीचे पुराक शुरुक रक्कम तन्या पक्षकाराचे नाव रस्त मीदणी करणार आहेत का ? stamp Purchasers Sign / Date Stamp Purchasr s Name) Consideration Amount) धेककतीचे वर्णन दिणी होणार असम्बास दुष्यम निबंधक कार्यातवाचे नांव f Through other person then Name & Address) Registrable Name Of S.R.O. roperty Description in ) Vhether it is to be Registeres) here of document / Article No. ne Of The Other Party) बालील शिक्का प्रतिज्ञापत्रा स्वतिरिक्त बापरण्यात बेणाऱ्या जुद्रांकावर उजटवावा. बरेदीबत । साठेबत । महाणबत् १००० हुना कर्ष्या राष्ट्रि # राहाता दुख्बन निवंधक कार्वालय,राहाता होय / नही Pric LIVE といって जुने तहसिन कार्यासय राहता उनले STP/96/1 3 FEB Rega No. SHANNA Egg No. 1000 Jose 1500 Jose 2000 Jose 1500 Jose OVERWINGS. म्हलाह्न - 411061 पेलीस स्टेशन समोर नदी सांगवी, सर्वे न 82 सीद्धी पार्क सोसाइटी विंग ए-1/8 साई चंक, पिंपके गुरव, पुणे, ब्रह्म pp police station navi sangavi, sr no 82 iddhi park society wing A-1/8 sai chowk, impale Gurav, Pune, WASHINGTON TO THE PROPERTY OF MANY OF MANY OF MANY OF MANY OF THE PROPERTY OF शानिनी प्रकाश पोसले Shallni Prakash Bhosale जन्म तारीख/DOB: 18/01/1960 पहिला/ FEMALE 6566 5250 1794 VID: 9192 1125 5362 6468 Mobile No: 7276044602 आधार, माझी ओळख

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

is based on the information provided by the concerned teachers and endorsed by me after due penal action or Affiliation of the College shall be withdrawal, as the case may be 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 verification and the same is/are absolutely true and correct. If at any stage it is revealed that any I am further hereby declaring that every information or contents in this Inspection Format

This declaration is voluntarily signed by me on 31st day of January 2025 at 10am

Area Almiednagar Dist Notary, Govt Of India R. N. Shaikh

BEFORE ME

Area Abmednagar Dist.
Regd. No. 10604 Expiry Date
18-05-2029

\* GO"

Name of Principal: Ms. Bhosale Shalini Pr

Date: 31.1.2025

AT SERIAL NO. 345 2025

4 FEB 2025

NOTED'& REGISTERED



R. M. SHAIKH animedroga: Dist. -Sc. No. 10504 Expiry Date 15-05-2029

