SPAR PI CITD? THE WEIGHT MANARASHTIR <u>n 2021</u> n 112500 नी दणी करणकि आहेत का ? केटनी होगार असल्यास दरग्रम निवधक कार्यालयाचे २५ 🍾 Gazadin ada 図 ot Mr Late Mrs. Hausabai Homoeopathic क्षेत्रला चलन Medical College and Hospital, Nimshirgaon पटाक विकल देवार ताल गांत ्य या पक्षकातल विवस $\mathcal{S}(f_i) = \mathcal{T}\mathcal{R}_i$ ावते असल्तारा व्यामे नात त प्रचा x1210 相關的 對於出 (1885) पहांक विक्री जोट तुवी का 2022 anath / Baun भग्नल विकास महादेव सही/दिसाम ^{पर्या}गण्याण्य प्रदेशन्द्रियेत्स्यत्वे बारा राष्ट्री त प्रत्याण ⁷⁻⁰⁶⁰ र^{ाज} भुजना मिलोचे ठिकाण/पत्ता लेश सरेश कलकणी ्या याती उन्होंनी मुद्रांक रहरेदी केला त्यांनी १९९. मही म. ३, ग्लॉक थ. ६६/६७, जयसिंमपूर, रा. मिलाक ाम जनगासती पहाक खरेदी केल्यापासून ह 附 11.45 910/2003-01 / Code - 201202? ार्ट मार्ट मुख्यमें यंधनकारक आहे. ANNEXURE- X

DECLARATION

L the Principal of the Late Mrs. Housabai Homoeopathic Medical College & Hospital, Nimshirgaon College / Institute solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website along with all Annexures 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 teachers information attached in respective Annexure-Vi are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2021-2022, as per my knowledge and information provided by the concerned teachers. The teachers in the <u>Annexure- VI</u> 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 <u>Annexure- VI</u> are not practicing in College working hours or out-side the City where the College /Institute is situated.

I further hereby declare 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 31 day of MAY 2022 at Nimshirgaon

Date: 31/05/2022

Place : Nimshirgaon



Dr. Mrs. Shubbangi S. Magdum Principal Late Mrs. Housabal Homoeopathic Medical College & Hospital,Nimshirgaon