

महाराष्ट्र MAHARASHTRA

2023

61AA 032260

नोटणी करणार आहेत का ?  
होणार असल्यास दुय्यम निबंधक कार्यालय सह  
हकतीचे वर्णन  
दला रकम  
विक्रत घणान्याच नाव  
पक्षकाराच नाव  
असल्यास त्याच नाव व पत्ता  
शुल्क रकम  
विक्री नाव वही अनु क्रमांक / दिनांक  
विक्रत घणान्याची सही / दिनांक  
नाधारक मुद्राक विक्रत्याची नाव सही व परत  
तसेच मुद्राक विक्रीचे ठिकाण / पत्ता  
कारणासाठी ज्यांनी मुद्राक खरेदी केला त्यांनी  
कारणासाठी मुद्राक खरेदी केल्यापासून  
न्यात वापरणे बंधनकारक आहे

डॉ. सुरेश कुलकर्णी

Late Mrs. Hausabai Homoeopathic  
Medical College and Hospital, Nimshirgaon

M VHS, Nashik  
श्रीशान हिममत की

17 NOV 2023  
SUB-TREASURY OFFICER  
SHIROL

900 54 14 DEC 2023

डॉ. शैलेश सुरेश कुलकर्णी

191, गल्ली न. 3, ब्लॉक न ६६/६७ जयसिंगपूर, ता. शिरोळ  
वि. प्र. क्र १७/२००३-०४ / Code - 2612027

**Declaration**

I, the principal of the Late Mrs. Housabai Homoeopathic Medical College & Hospital Nimshirgaon, Tal- Shirol, Dist- Kolhapur-416101. 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 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 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 2023-24**, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure-VI 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-VI** 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 15th day of December 2023 at Nimshirgaon.

Date:-15/12/2023

Place:-Nimshirgaon



  
**Dr. Mrs. Shubhangi S. Magdum**  
**Principal**  
**Late Mrs. Housabai Homoeopathic**  
**Medical College & Hospital, Nimshirgaon**