

## ुक्रीक विक्रीचे ठिकाण - जिल्हा ीिकारी कार्यालय, सिंधुदुगेवगरी Ex Officio Stamp Vendor दस्ताचा ब्रकार - प्रतिज्ञापत्र / तारभगहाण / करारपत्र / खरेदीखत District Treasury Office, परवाना क्र. १७०८००४ Sindhudurg अखत्याच्यन्त्र / संमतीपत्र / बैंक दिनांक De ( of 2022 किंमत 9an APR 2022 29 \* गंक विक्रि क. 484 10 1. 5 622242 Ales o(N2) ..... एकेण रक्कम 9 cul े ते श्र realady 912/034 नुजंक.कोणाकडे सादर करणार HELLICZ BURNO DELLATON श्री, प्रदिप धोंडी चव्हाण मदांक विक्रेता, सिंधुदुर्गनगरी (मुद्रांक घेणाऱ्याची सही)

Annexure- XIII

## **DECLARATION**

I, the Principal of the Mrs. Sawant Ujjwala Arun, Shree Anant Smriti Charitable Trust, Kasal, Institute of Nursing, Kasal 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 be by the concerned teachers and duly verified by me.

It is further submitted the teachers information attached in respective Annexure-VI & VII are not working in/ at any other College/ Institute or presented themselves at any inspection for the Academic Year 2020 - 2021, 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 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 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 10 day of May 2022 at Gaorai.

Date: 10/05/2022 Place: Gaorai



SacDand U.A Principal of Numi Institute of Nursing, Kasal AVP. Gaorai, Tal. Kudal. Signature of Dean/Principal Name of the Signatory-(with Seal of the College/Institute)