



महाराष्ट्र MAHARASHTRA

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WE 404100

दस्तावेज प्रकार / अनुसूचित प्रकार -
 दस्त नोंदणी करीताना काहीत कर?
 नोंदणी करणारा / दस्तावेज प्रमाण नियंत्रण खात्याने जोडले जाई
 मिळवतायची वारी -
 नोंदवता काळानुसार -
 मुद्रांक किंमत किती पावते तीच -
 हुद्दये अन्वयेताना द्यायचे तसेच न पावले -
 मुद्रांक मुल्य रक्कम - 100/-
 मुद्रांक किती नोंद घ्यायचे - 6775
 मुद्रांक किंमत कुठ्यापासून घ्यायची -



डॉ. करिमा
 कर्माचार्य मुख्य
 दिनांक - 09/02/2021

उप कावागार अधिकारी
 धिपत्रगुण

25 MAR 2021

परमार्थनगरक मुद्रांक नियंत्रणारी खाती -
 परवानगा क्रमांक तसेच मुद्रांक -

दिनांक 09/02/2021
 डॉ. करिमा कर्माचार्य
 मुख्याधिकारी, दस्तानुसूचित मुद्रांक प्रमाण
 परमार्थनगरक निपत्रगुण, दि. रातनागिरी
 सा. नं. 1-2000-00

ANNEXURE- XIII

DECLARATION

I, the Dean / Director / Principal of the SVJCT's Samarth Nursing College, Sawarde, Kasarwadi, Tal-Chiplun, Dist- Ratnagiri. Institute solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website alongwith 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- VII , VIII & X are not working in / at any other College / Institute or presented themselves at any inspection for the Academic Year 2022 - 2023 , as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- VII , VIII & X 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- VII , VIII & X 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 04 day of 08.....2022.. at 10:30 am.

Date: 04/08/2022

Place: Dawan, Sawarde



Signature of Dean / Principal

Name of the - BHUTKAR BARASAHEB

Signatory - BR Bhutkar RAMDAS

(with Seal of the College / Institute)

Principal

Samarth Nursing College
Kasarwadi, Sawarde,

Tel. Chiplun, Dist. Ratnagiri 415606 Page 1 of 2

