



NOTARIAL
R.J. RATHI
ADVOCATE
Shevgaon,
Dist. Ahmednagar
R.No. 3896
Dt. 05/03/2023

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2023

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उप कोषागार कार्यालय
शेवगाव
71 JAN 2024
उ को.का. शेवगाव

प्रतिज्ञापत्र

मुद्रांक घेणाऱ्याचे नाव मि.सिजिली जोसेफ

हस्त मि.सिजिली जोसेफ

मुद्रांक विक्री बाबतची नोंदवही अनु. क्र. 20202 921912028

मो. 9442071441

वसंत काले मुद्रांक विक्रेते
शेवगाव परवाना क्र. 8/9998

ANNEXURE- XIII

DECLARATION

S.No./S.S.ENT 40
2024

(To be prepared on a Stamp Paper Rs.100)

I, Miss.Cicily Joseph the Dean/ Director/ Principal of the Nityaseva Hospital College of Nursing Shevgaon Dist- Ahmednagar.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 & 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-...&...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 & information provided by the concerned teachers. The teachers in the Annexure-... & ... are staying in the same city/ town/ village, where the college

Principal Cicily Joseph
Nityaseva Hospital College of Nursing
Shevgaon, Dist. Ahmednagar

R.J. Rathi
RAGHUNATH J. RATHI
ADVOCATE & NOTARY PUBLIC
Shevgaon, Dist. Ahmednagar

S.No./S.S.ENT yo
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institute is situated or adjacent to the city/town/village where the college/Institute is situated & having the valid proof of residence of the said city/town/ village. The teachers in the Annexure -...&... are not practicing in College working hours or outside 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 & correct. If at any stage it is revealed that any information or content given in this declaration in 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 -----day 20 at

Date: 12/01/2024

Place: Shevgaon



Cicily Joseph

Signature of Dean/Principal

Name of the signatory CICILY JOSEPH

(with seal of the college/instate)

Principal

**Nityaseva Hospital College of Nursing
Shevgaon, Dist. Ahmednagar**



NOTED & REGISTERED
AT SR. NO. 70 2024
THIS DOCUMENT CONTAIN
1 PAGES

BEFORE ME

R.J. Rathi
RAGHUNATH J. RATHI
ADVOCATE & NOTARY PUBLIC
SHEVGAON, DIST A.NAGAR



12 JAN 2024

Faint mirrored text from the reverse side of the page, including 'RAGHUNATH J. RATHI' and 'ADVOCATE & NOTARY PUBLIC'.

Faint mirrored text from the reverse side of the page, including 'Principal' and 'Nityaseva Hospital College of Nursing'.