

## DECLARATION

## (To be prepared on a Stamp Paper of Rs.500 Duly Notarized)

I, the Principal of the Nityaseva Hospital College of Nursing, Shevgaon, Dist. Ahilyanagar. solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website along with all Ännexure is true and correct to my knowledge & Belief. 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 are not

> Lialy Jusque Principal

Nityaseva Hospital College of Nursing Shevgaon, Dist. Ahmednagar

ADVOCATE & NOTARY PUBLIC Shevgaon, Dist. Ahmednagar

5.NO.18.5.ENT 10/6

working in / at any other College or presented themselves at any inspection for the Academic Year 2025-2026 as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- VII are staying in the same town where the College is situated or adjacent to the town where the College is situated and having the valid proof of residence of the said town. The teachers in the Annexure- VII are not practicing in College working hours or outside the city where the College is situated.

Infrastructure Required as per MSR and Indian Nursing Council Norms is available and we have own building for Nursing Institute or Required Specified Constructed Area as per Norms Laid by Authorities for College and Hostel as per Intake capacity and further No Other Nursing Colleges Running in Same campus or In Same Building

I am further hereby declaring 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 Thursday January 3 2025 At.

Place: Shergarn

Signature of
Dean/Principal Name
of the Signatory- Cicily Joseph
(With Seal of the College/Institute)
Date: 0.3/02/2025



Principal
Nityaseva Hospital College of Nursing
Shevgaon, Dist. Ahmednagar

AT SR. NO. 160 2075

1- 3 FEB 2025

RAGHUNATH J. RATHI ADVOCATE & NOTARY PUBLIC SHEVGAON. DIST A NACAD 2-2-25

