

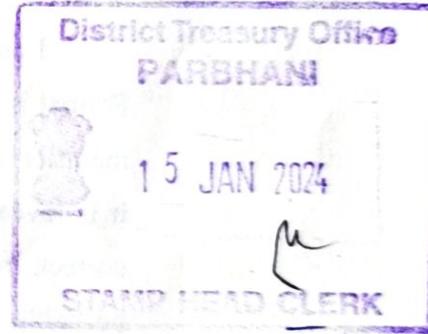


महाराष्ट्र MAHARASHTRA

2023

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20675 11/01/2024  
Dr. Prafulla Patil BSc Nursing College, Parbhani  
Sanjay D Sardeshpande  
Stamp Vendor  
Tansil Office Parbhani  
No. 320101  
प्रमुख प्राचार्य  
प्राचार्य रमेश के. लख



ANNEXURE- XIII XIV

**DECLARATION**

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

I, the Principal of the Dr. Prafulla Patil BSc Nursing College, Parbhani 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 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 & XII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2024-2025, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure-VII & XII are staying in the same

**जोडपत्र - १ / Annexure-I**

खालील शिक्का प्रतिज्ञापत्रासाठी वापरण्यात येणाऱ्या मुद्रांकावर उमटवावा. २०२४

फक्त प्रतिज्ञापत्रासाठी / Only For Affidavit

१. मुद्रांक विक्री नोंदवही अनु. क्रमांक-दिनांक  
(Serial No./Date) ॥ ३१/०१/२०२४

२. मुद्रांक विक्री घेणाऱ्याचे नाव व  
रहिवाशी पत्ता व सक्षे  
(Stamp Purchaser's Name,  
Place Of Residence & Signature)  
डि. प्रमिला पाटील  
प्रा. २ मंटेज के एन.

३. परवानगारक मुद्रांक विक्रेत्याची सही Sanjay D. Sardeshmunde  
व परवानगी क्रमांक तसंच Stamp Vendor L. No. 3201011  
मुद्रांक विक्री / शिक्का / पत्ता Trust Office, Parbhani

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 & XII** 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 31..day of ...०१./.....2024 at

Date : ..31/01/24.....

Place : Parbhani



Signature of Principal

Name of the Signatory - Ramesha K.H

(with Seal of the College/Institute)

**Principal**  
**Dr. Prashila Patil**  
**B.Sc. Nursing College, Parbhani**