



ब.क. - .....  
दस्तावेज संख्या / क्रमांक / दिनांक / महीना / वर्ष  
दस्तावेज संख्या / क्रमांक / दिनांक / महीना / वर्ष

मिहिरावणी, कोपरगाव

मुद्रांक : मार. जे. मम. ७७३३३३३, कोपरगाव

दुसऱ्या मुद्रांक : ७७३३३३३

मुद्रांक दिनांक : २२/०१/२०२४

मुद्रांक विकत : श्री. हनुमतराव तुकाराम मेहेत्रे, कोपरगाव

पत्तयाना क्र. STP/9/95 तहसिल कार्यालय, कोपरगाव

by the concerned teachers, The teachers in the ANNEXURE – VI & ANNEXURE – 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 & ANNEXURE – VII are not practicing in College working hours or out-side the City where the College /Institute is situated. 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 22<sup>nd</sup> day of January, 2024 at 10am.

Date : 22.01.2024

Place : Kopergaon



Principal  
Rashtrant Mahadhan Swami  
College of Nursing,  
Koharnan, Tal. Kopergaon,  
Dist. Solapur, (M.S.)