



जाडपत्र-१. (प्रतिज्ञापत्र)

२०२१

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प्रतिज्ञापत्र कोणाकडे सादर करावयाचे		
प्रतिज्ञापत्रासाठीचे कारण	Agnani's Public Education Society, Gondia, MS, MS, Gondia	
मुद्रांक विक्रेता कोणाच्याचे नांव रकबाशी परतवा	अनु. क्र. ८९८३६	दिनांक २९/०३/२०२३
मुद्रांक विक्रीसाठीच्या तोंडाकडी अनु. क्र. व दिनांक	मा. Tmk	सही:
मुद्रांक विक्रेता कोणाच्याचे नांव रक्ती		
परवानग्याद्वारे मुद्रांक विक्रीसाठी		
याची परवाना क्रमांक		
वारीय मुद्रांक विक्रेत्याचे ठिकाण/परतवा		

मुद्रांक विक्रेता अर्जनामिसे कोर्टाला, गोंदिया परवाना क्र.-२/१९९२ कोड नं.-४४०१००

मोठ्या कार्यालयीन जागी मुद्रांक

ANNEXURE- XVI

DECLARATION

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

I, Dr. Jaymala Vijaykishor Shirke the Dean / Director/ Principal of the M. S. Ayurvedic Medical College, Hospital & Research Institute, Gondia (MS) College / 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 teacher's information attached in respective Annexure-VII & VIII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2023-2024, as per my knowledge and information

provided by the concerned teachers. The teachers in the Annexure- VII & VIII 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 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 30 day of JUNE 2023 at Gondia.

Date : 30.06.2023

Place : GONDIA

Signature of Dean/Principal

Name of the Signatory- **Dr. Jaymala Vijaykishor Shirke**

(with Seal of the College/Institute)

**M.S. Ayurvedic Medical College,
Hospital & Research Institute, Gondia (M.S)**

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