



प्रतिभाषण क्रमांक	0 2023 0	शपथपत्र	78AA 094761
सादर करावयाचे		रम. रज.	आयुर्वेदिक कॉलेज गोंदिया
प्रतिभाषणासाठीचे कारण		अनु क.	दिनांक 28-1-2024
मुद्रांक विस्तार देण्याचे			
संव सत्तासी पत्रा			
मुद्रांक विक्रीसाठीच्या मीत			
की अनु क. व दिनांक			
मुद्रांक विस्तार			
सादर करावयाचे ताल वही			
प. न्यायांक मुद्रांक			
निकाल			
परी परावना क्रमांक			

DECLARATION

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

ANNEXURE- XVI

मुद्रांक विस्तार अर्जावर आधारित, गोंदिया
परवाना क्र. - 2/1992 बोंड नं. - 680000

महाराष्ट्र शासनाचे दस्तऐवज

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 **2024-2025**, 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 01 day of February 2024. at Gondia.

Date : 01/02/2024

Place : GONDIA



J. Shirke
15 Feb 2024
Principal
Signature of Dean/Principal
M.S. Ayurvedic Medical College,
Gondia (M.S.)
Name of the Signatory- Dr. Jaymala Vijaykishor Shirke
(with Seal of the College / Institute)