



महाराष्ट्र MAHARASHTRA

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अनुक्रमांक.....1839.....दिनांक.07/7/23.....रुपय...100.....

मुद्रांक कोणत्या कारणासाठी वापरण्याचा आहे.....

मुंबई मुद्रांक अधिनियम १९५८ चे अनुच्छेद क्र.....

मुद्रांक वापरणाराचे संपूर्ण नांव.....

संपूर्ण पत्ता.....

हस्ते व्यक्तीचा संपूर्ण नांव.....

पत्ता.....

समीर मुभाणी
सातारा



(श्री. दिपक रामचंद्र तावरे)

ग. २६९ सोमवार पेठ, सातारा.

प. क्र.

डु. नि. का. सातारा क्र. १

मुद्रांक विक्रेता

मुद्रांक धारकाची/हस्ते व्यक्तीची सही

Annexure - XVII

P.T.O.

DECLARATION

I, the Dean / Director/ Principal of the **Mahalaxmi College of Physiotherapy & Rehabilitation Center, Raigaon, Satara** College / Institute solemnly states on affirmation that the information provided by me in Inspection Format as well as uploaded on College Website along with all Annexure 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 & 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 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 27 day of June 2023 at Satara

Date : 27/06/2023

Place : Satara



Signature of Dean/Principal *H. Kemp*
 Name of the Signatory **Mahalaxmi College of Physiotherapy and Rehabilitation Center, Raigaon, Satara.**
 (with Seal of the College /Institute)