



MAHARASHTRA

2022

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6 MAY 2022
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दि. 05.05.2022
दस्तावेज प्रकार..... प्रतिपात्र
दस्तावेज नोंदणी करणार.....
मिळवणीचे बर्तन.....
मुद्रांक दिनांक..... TCN INE
पत्ता.....
वृत्तान्त सादर करणारा.....
इसवी वर्षाचे नंबर व पत्ता.....
साक्षी.....
मुद्रांक दिनांक व स्थान.....
मुद्रांक दिनांक व स्थान.....
मुद्रांक दिनांक व स्थान.....



17 3 APR 2022

प्रथम मुद्रांक लिपीक कोषागार पुणे के रत्ना

DECLARATION

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

I, the Principal of the Tehmi Grant Institute of Nursing Education College / Institute solemnly state 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 that the teachers information attached in respective Annexure- VI & VII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2022 – 2023 as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- VI & 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 & 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 maybe.

This declaration is voluntarily signed by me on day of 20..... at.....

Date :

Place :



Ale
Signature of Dean/Principal



Name of the Signatory
(with Seal of the College / Institute)

PRINCIPAL
TEHMI GRANT I.N.E
RUBY HALL CLINIC, PUNE

ATTESTED BY

A. Rashid D. Sayed
Notary, State of Maharashtra
PUNE



Noted & Registered
At Sr. No.: B9147/2022
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