

महाराष्ट्र MAHARASHTRA

2022

36AA 663122

मुद्रांक विक्री नोंदवही अ.क्र. 688 दि. 16/5/2023  
मुद्रांक शुल्क रक्कम - 1.00/- आप्रत्यक्ष  
मुद्रांक विक्रीत घेणाऱ्याचे नाव वसंतराव कोळे बेम्बोडी होम्योपॅथिक मेडिकल कॉलेज  
हस्त. अर्जाबाबत घेण्यात येणारा म.प. 16/2/19/16 प्रमेज होम्योपॅथिक  
संस्थानाबाबत मुद्रांक विक्रीत घेण्यात येणारा म.प.क्र. 3009/03 सही  
मुद्रांक विक्रीत घेण्यात येणाऱ्या अर्जाची परत  
नियम निवाराक बाबत म.प. 2 लतूर  
मुद्रांक विक्रीत घेणाऱ्याचे सही



ANNEXURE- XIII

DECLARATION

I, the Principal of the **Vasantrao Kale Homoeopathic Medical College & Hospital, Latur 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 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 teachers information attached in respective Annexure- VI 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 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 are not practicing in College working hours or out-side the City where the College /Institute is situated.

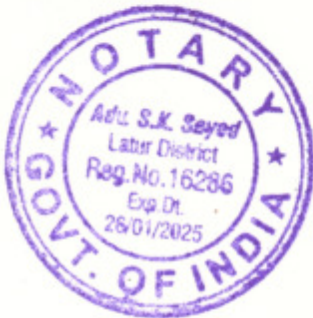
I further hereby declare that every information or contents in this Inspection Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same is/are absolutely true and correct. If at any stage it is revealed that any information or content 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 ..... day of 26/05 2023 at Latur.

Date : 26/05/2023

Place : Latur

Principal  
Signature of Principal  
Vasantbhai Khamitkar  
Medical College & Hospital M.J.D.C.  
Name of the Signatory Dr. Khamitkar S. C.



7 JUN 2023

**AFFIDAVIT**

Solemnly affirmation before me  
by Dr. Khamitkar Smita Chandramath

Age 34 Service

R/o Latur Latur

Who is identified before me by

Shri Self

To whom I know personally.

S.K. Sayed  
**Adv. S.K. Sayed**  
Notary  
Govt. of India

**Reg. Sr.No** 100/2023