



महाराष्ट्र MAHARASHTRA

2023

64AA 563165

मुद्रांक विक्री कारण-

जोडपत्र १ व २ / Annexure-I & II

Reason of sale stamps and Amount

मुद्रांक विक्रीत घेणाराचे नांव व पत्ता-

Stamp Purchasers Name

हासो असावयास त्याचे नांव व पत्ता

Stamp Purchasers Name

मुद्रांक विक्री दिवशीचे नंबर

Serial No and Date

मुद्रांक विक्रीत घेणाराची सही

Stamp Purchasers Sign.

मुद्रांक विक्रीत घेणाराचे नावामुळे येऊन

पत्रांक क्र. २३०३०४० मु. वि. डि. वि. कार्यालय, वंदना

ज्या काळात, त्यांनी मुद्रांक खरेदी केला त्यांनी त्याच काळातच मुद्रांक खरेदी केलेल्यापुढे व पहिल्यात नंतरचे बंधनकारक आहे.

Principal

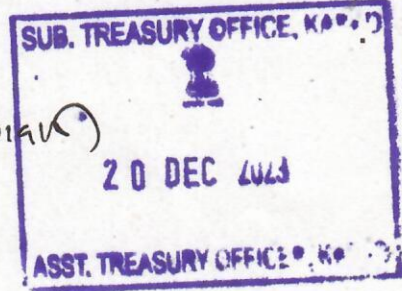
Late Bhaiyyasaheb Ghorpade Institute

of Physiotherapy, Malwadi (Masur),

Tal. Karad, Dist. Satara

दिनांक

20/12/2023



ANNEXURE- XVII

DECLARATION

I, the Dean / Director/ Principal of the **Late Bhaiyyasaheb Ghorpade Institute of Physiotherapy 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- 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.

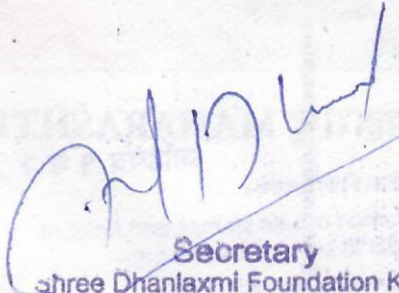
I am further hereby declare that every information or contents in this Inspection Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same is/are absolutely true and correct. If at any stage it is revealed that any information or content 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 10th day of February 2024 at 4:00 P.M

Date : 10.02.2024

Place : MASUR




Secretary
Shree Dhanlaxmi Foundation Karad
Reg. No. E-870-SATARA
482, Moraya Arcade, Shaniwar Pet
Karad, Dist. Satara -415110