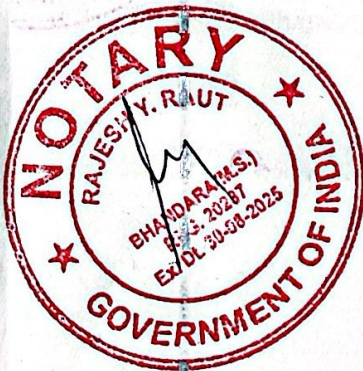
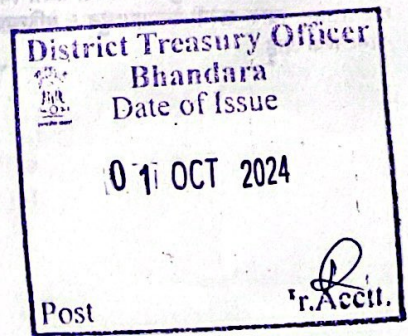


महाराष्ट्र MAHARASHTRA

भोजराजजी भोंडेकर फिजिओथेरेपी कॉलेज भंडारा मा.चे.त.म.  
2023 87AA 831280

सैयद अहमद अली  
स्टॅम्प व्हेंडर भंडारा  
क्रमांक १०/९७  
ऑ.ला.कोड क्रमांक  
४७०१००१

क्रमांक:- 1915  
किंमत:- 100  
दिनांक:- 05/02/25  
1915 त 1919



ANNEXURE- XIV

### DECLARATION

### Physiotherapy Faculty

I, **Mohammed Rafi** Principal of the Bhojrajji Bhondekar Physiotherapy College, Sirsi, Bhandara. 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



**नोटरीय - ३**

**जालीम शिवका प्रतिज्ञापत्रा व्यापिका वापरण्यात**

राज्याच्या मुद्रांकावर समस्तवाचा.

नमूनाचा प्रकार / अनुक्रम क्रमांक **5 HB**

इस्त नोटरी करणाऱ्या माहेत का ?

नोटरी रिणार असल्यास दुय्यम

निबधक कायदावाचि नाव

मिळकतीची नारा

मराठीत रक्कम

मुद्रांक विक्त घालावयाचे ना

दुसऱ्या वाक्यावर नाव

हस्त शिवायास त्याचे नाव व पत्ता

मुद्रांक शाला रक्कम

मुद्रांक विक्ती नोंत वरी अनु. / दि

मुद्रांक विक्त घालाव्याची मही

संयत अहमद अली

सत्य वडेकर भडारा

पंक 10/10

नहरील कार्या जवळ भडारा

या कारणासाठी ज्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून ६ महिन्यात वापरणे अनिवार्य आहे.

मोजर रज्जी भोजकर मिजिमोघेरपी कोलेज भंडारा

MUHS नाडीक

चेतन कमलाकर गावक श मयवास

100x5 - 500/-

1915 ते 1919 दि. 05/02/25





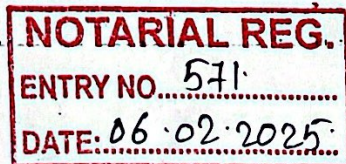
themselves at any inspection for the Academic Year 2025 -2026, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure-VII & VIII are staying in the same city/town/village where the College / Institute is situated or adjacent to the city / town / village, 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 Thursday day of 06/02/2025 at Bhandara

Date: 06/02/2025

Place: Bhandara



Signature of Dean/Principal

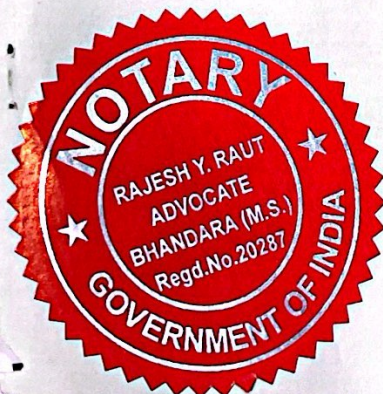
Name of the Signatory- Mohammed Rafi

**ATTESTATION OF AFFIDAVIT**

I solemnly affirm that this is my n. signature / Mark and that contents of this affidavit are true

Signature of Deponent

Signature of Notary



Rajesh Y. Raut  
NOTARY  
Regd. No. 20287  
Sant Tukadoji Ward,  
Near LIC Office, Bhandara(M.S.)



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