

महाराष्ट्र MAHARASHTRA

2023

71AA 718140

सदरचा मुद्राक लिख अण्ड लायसेन्ससाठी नाही.

मुद्राक कोणाच्या कारणासाठी वापरण्याचा आहे प्रतिसाध

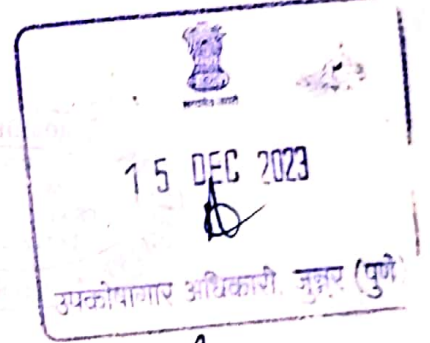
मुद्राक अर्थिनियम, १९५८ चे अनुच्छेद क्र. _____

संपूर्ण नांव प्राचार्य अनन्तराव कानसे होमिओपॅथिक

संपूर्ण पत्ता कोडिकल कॉलेज आलेफाटा

हस्ते व्यक्तीचे नांव व संपूर्ण पत्ता चहरे, कोडिकल

मुद्राक धारकाची / हस्ते व्यक्तीची सही _____



Noted & Registered
at Ser.No. 33/2024
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Sh. K. K. K.

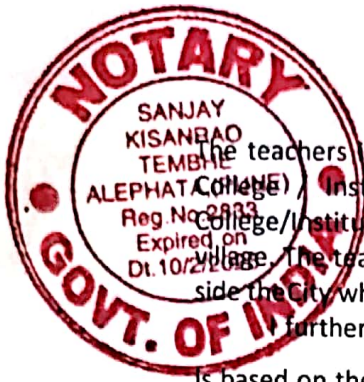
DECLARATION

K. K. K.
श्री. ANNEXURE: विंग कोरडे

मुद्राक विक्रेता, आळे (आळेफाटा)
ला.नं. २२०००११. मुद्राक ३१/३/२४

I, the Principal of the Anantrao Kanase Homoeopathic Medical College & Hospital, Alephata 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 2024-2025, 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 outside 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 29th day of December 2023 at Alephata.

Date : 29/ 12/2023

Place : Alephata

Signature of Principal

[Handwritten Signature]

Signature of Principal

Name of the Signatory- Dr. Gholap K.V.

(with Seal of the College / Institute)

Principal

**Anantrao Kanase Homeopathic Medical College & Hospital
Alephata**



- 9 JAN 2024

Sign- Shinde Ganesh Dhangrao

Name- *[Handwritten Signature]*

I Know the person.

Signed before me.

Noted & Registered
at Sr.No. 33/2024
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BEFORE ME

[Handwritten Signature]
**SANJAY K. TEMBHE
NOTARY, GOVERNMENT OF INDIA
ALEPHATA, (PUNE)**

