

महाराष्ट्र MAHARASHTRA

2023

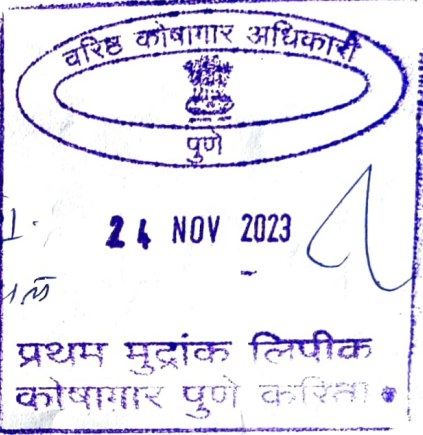
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फक्त प्रतिज्ञापत्रासाठी

मनु.क्र. १००१ दि. मु.शु.रकम. १००

मुद्रांक विकत घेणाऱ्याचे नाव अर्पणा लुकास जाधव  
पत्ता सुभाष जेठपुरे २ अर्पणा लुकास जाधव  
हस्तचे नांव अर्पणा लुकास जाधव



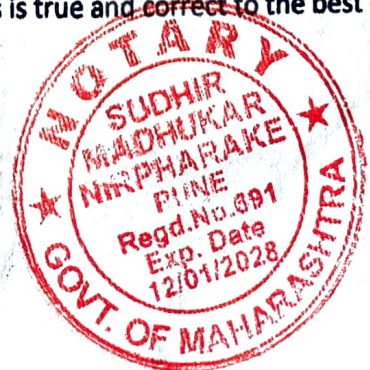
इंजिनियर ए. मजावर  
परवाना क्र. २२०११२०  
१३३, गुरुवार पेठ, पुणे-४२.  
भासकिय कार्यालय/न्यायालयामध्ये प्रतिज्ञापत्र सादर करण्यासाठी  
मुद्रांक कागदाची आवश्यकता नाही. (शासन आदेश दि. १/७/२००४ नुसार)  
या कारणासाठी मधील मुद्रांक खरेदी केला त्याची त्याच कारणासाठी मुद्रांक  
व्यती केल्यापासून ६ महिन्यात वापरणे बंधनकारक आहे.

(२६) ५५१) (४३)  
हस्त ब्यतीचे नाव अर्पणा लुकास जाधव / पत्ता / D. Lie. No. १

ANNEXURE -XIII

DECLARATION

I, Ms. Arpana Lukas Jadhav Incharge Principal of the St Andrews College of Nursing Pune 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 that the teachers information attached in respective Annexure - VI & VII are not working in / at any other College 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 & 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.

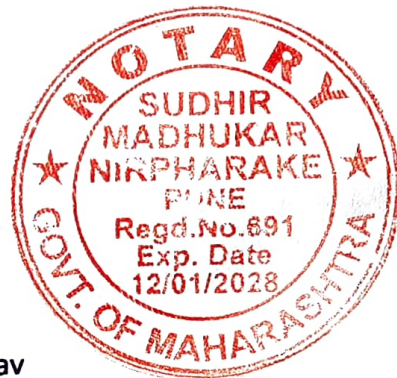
I am further hereby declare that every information or contents in this Inspection Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same is/are absolutely true and correct. If at any stage it is revealed that any information or content 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 19th January 2024 10 am

Date - 19/01/2024

Place - Pune

  
Signature of Dean/Principal



Name of the Signatory - Ms.Arpana Lukas Jadhav



Seal of the College / Institute)

*Arpana*  
**BEFORE ME**  
**S. M. NIRPHARAKE**  
**NOTARY STATE OF MAHARASHTRA**  
**PUNE**  
Noted and Registered  
at Sr. No. 90124  
**1 FEB 2024**

