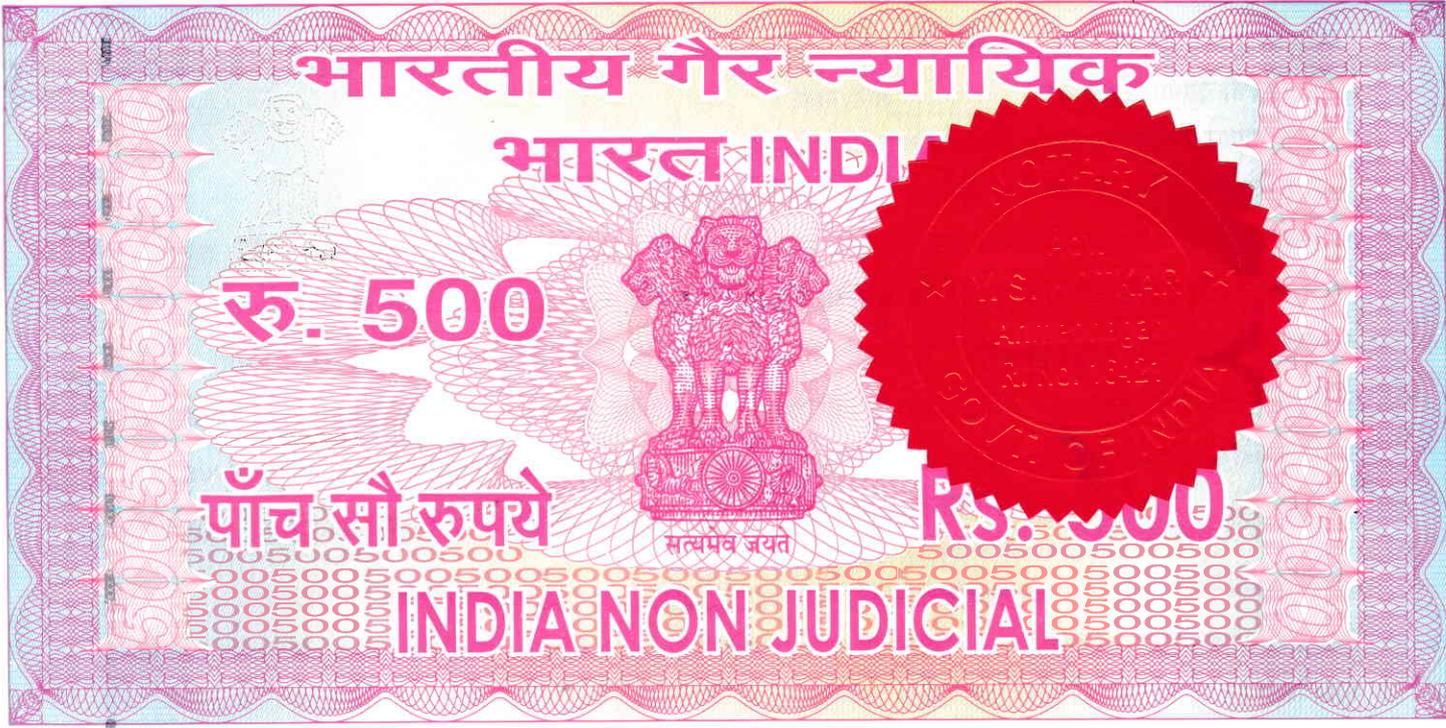


05 FEB 2026

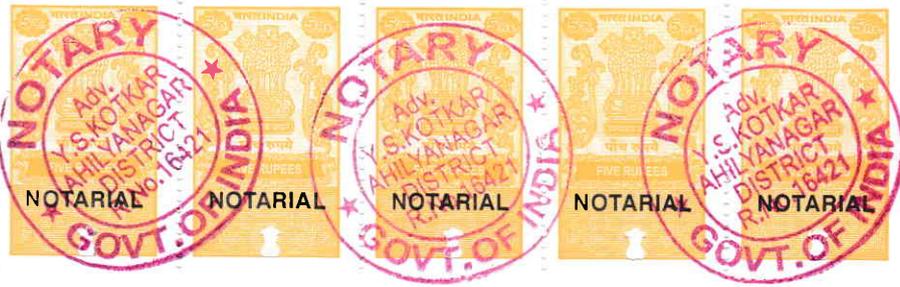
206/2026



महाराष्ट्र MAHARASHTRA

2025

DT 049532



ANNEXURE-XVI

DECLARATION

I, the principal of **Parvatibai Mhaske Institute of Nursing, Ahilyanagar** solemnly states on affirmation, that information provided by me in Inspection format as well as uploaded on College Website along with all Annexure is true and correct to my knowledge & Belief. The said information is provided to me by the concerned teachers and duly verified by me. It is further submitted the teacher's information attached in respective **Annexure- VI & VII** are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2026-2027, 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 /



दस्ताचा प्रकार/अनुच्छेद क्रं. : प्र. पत्र

दस्त नोंदणी करणार आहे का? _____ होय/नाही

नोंदणी होणार असल्यास दुय्यम निबंधक कार्यालयाचे नाव : _____

मुद्रांक विकत घेणाऱ्याचे नाव – पार्वतीबाई म्हस्के इन्स्टिट्यूट ऑफ नर्सिंग, अहिल्यानगर

दुसऱ्या पक्षकाराचे नाव –

हस्ते असल्यास त्यांचे नाव व पत्ता :- गणेश टपले 

मुद्रांक शुल्क रक्कम : 500

नोंदवही अ.क्र. 28087

दि. 29/01/2026

हरिष द.माडगे 

मुद्रांक विक्रेता, तहसिल कार्यालय, नगर

ला.नं. 10470/98

ज्या कारणासाठी मुद्रांक खरेदी केला त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून 6 महिन्यांच्या आत वापरणे बंधनकारक आहे.

NOTARY
Adv.
Y.S.KOTKAR



NOTARY
Adv.
Y.S.KOTKAR
AHILYANAGAR
DISTRICT
R.No. 16421
GOVT. OF INDIA



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.

Infrastructure Required as per MSR and Indian Nursing Council Norms is available and we have own building for Nursing Institute or Required Specified Constructed Area as per Norms Laid by Authorities for College and Hostel as per Intake capacity and further No Other Nursing Colleges Running in Same campus or In Same Building

I am further hereby declaring 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 04 day of February 2026 at Ahilyanagar.

Date : 04/02/2026

Place: Ahilyanagar

Mr. Ajjappa H. Chavaradar

PRINCIPAL
PARVATIBAI MHASKE INSTITUTE
OF NURSING, AHILYANAGAR



05 FEB 2026

Noted & Registered On
Serial No. 206/2026

BEFORE ME

YOGHA S. KOTKAR
ADVOCATE & NOTARY PUBLIC
Sinmitra Colony, Infront of Mahalaxmi Garden,
Savadi, Ahmednagar-414003.
Mob.8857093851