



महाराष्ट्र MAHARASHTRA

2025

DU 496396

कारण - - - - - शपथ पत्र - - - - - 500 रु

मुद्रांक विकत घेणाऱ्याचे नांव - आशादास सुनीता

रहिवासी पत्ता - - - - - कडा ता. आष्टी

नोंद वही अनु. क्र. 90499 127 MAR 2026

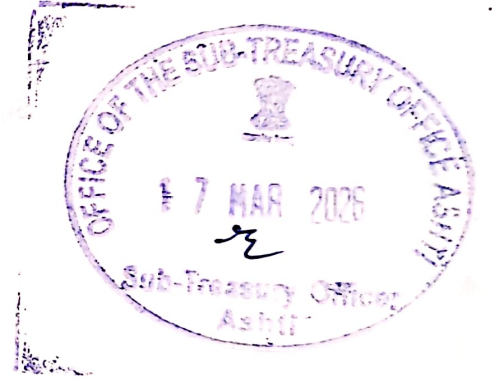
मुद्रांक विकत घेणाऱ्याचे - हसे ॥ स. आ. आ. हर

*Asmita*

सौ. आशा दिनकर दाणी

मुद्रांक विक्रेता प. क्र. ८४

कडा ता. आष्टी जि. बी. ड.



### DECLARATION


I, Mrs. Suneetha Adapala Principal of the Loknete Dr. Shivajirao Shendge B.Sc Nursing 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 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 teachers information attached in respective Annexure- .....XII &....XIII(A) 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 .....XI &....XII(A) 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 &.....XIII 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..02 day of April.....2026....at..5:30 pm

Date :- 02/04/2026

Place:- Rakali (A) Koda

  
Signature of Principal

Name of the Signatory- **Mrs. Suneetha Adapala**

Date: .....

**Principal**

**Loknete Dr. Shivaajirao Shendage**  
**College of Nursing**  
**Tal. Ashti Dist. Solapur**