



महाराष्ट्र MAHARASHTRA

2024

30 JAN 2025

39AB 100153

जिल्हा कोशनाम कार्यालय, ठाणे
27 JAN 2025
मुद्रांक प्रमुख लिपीक / लिपीक

Annexure-I - Only for Affidavit

Serial No. 2/1147 Date
Stamp Purchaser's Name
Place of residence & Signature



Stamp Vendor Signature
Dr. Poojendra Vishnu Shingade
License No. 1201043, Shingade Services Shop No. 47,
Gr. Floor, Prahat Centre, Sector-1A, CBD Belapur, Navi
Mumbai-400614, Mo. 9324704124

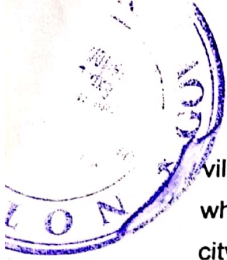
या कागदावरील प्रतीने मुद्रांक खरेदी केला त्याची तपस करपासाठी
मुद्रांक कार्यालयीन वेळापत्रातून ३ महिन्यांत बांधणी करवता येईल असे

ANNEXURE- XIV

DECLARATION

I, the Principal of the Dr. G. D. Pol Foundation, YMT College of Physiotherapy College / Institute solemnly states on affirmation that the information provided by me in Inspection Format as well as uploaded on College Website alongwith 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 themselves at any inspection for the Academic Year 2025-26 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 31st day of January 2025 at Kharghar

Date : 31/01/2025

Place : Kharghar



Signature of Dean/Principal

Name of the Signatory- Dr. J. Ezhil Mathi

(with Seal of the College / Institute)



ATTESTED BY ME

REKHA KISHORE HOWALE
Advocate & Notary Public
Shop No. 13, Prabhat Center
Ground Floor, Sec. 1A,
8D Belapur, Navi Mumbai-40081

31 JAN 2025