



महाराष्ट्र MAHARASHTRA

2025

EM 998391

अनु.क्र. ४५७३८ दि. १२/११/२०२६ यशोवर्धन मु. शु. रक्षण म. ५००८/-
प्रस्तावना प्रकार Affidavit

कस्त नॉटरी करणार आहेत का ? होय/नाही.

विक्रयकरीचे वर्णन

मुद्रांक विकत घेणाऱ्याचे नांव श्री. ई. एस. सुभद्रा के जिनल कॉलेज ऑफ नर्सिंग
पता मफ सी रोड पुणे

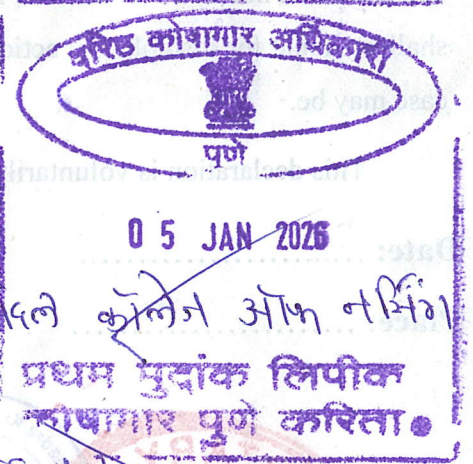
दुसऱ्या पक्षकाराचे नांव

हस्त व्यक्तिचे नांव व पत्ता आकाश चोत्रे/फ. रोड पुणे

..... श्री. सुभाषी सुहास बनकर

..... परवाना क्र. २२७९९९७

मुद्रांक विकत घेणाऱ्याची सही १३४४ शिवाजीनगर, पुणे म न पा समत/पुणे



DECLARATION

I, the ~~Dean/Director/~~ Principal of the Deccan education Society's Smt. Subhadra K. Jindal College of Nursing, Pune 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- VI & VII are not working

in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2025 - 2026, 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.

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 day of20.....at.....

Date:

Place:

Dr. Sharada Rakesh Chavan
Signature of Dean/Principal

PRINCIPAL

D.E. Society's Smt. Subhadra K.
Jindal College of Nursing, Pune.

BEFORE ME

SHRUTI SUBHASH SANKPAL
ADVOCATE & NOTARY
GOVT. OF INDIA

Noted & Registered
at Serial No. 185/2026
03-FEB-2026

