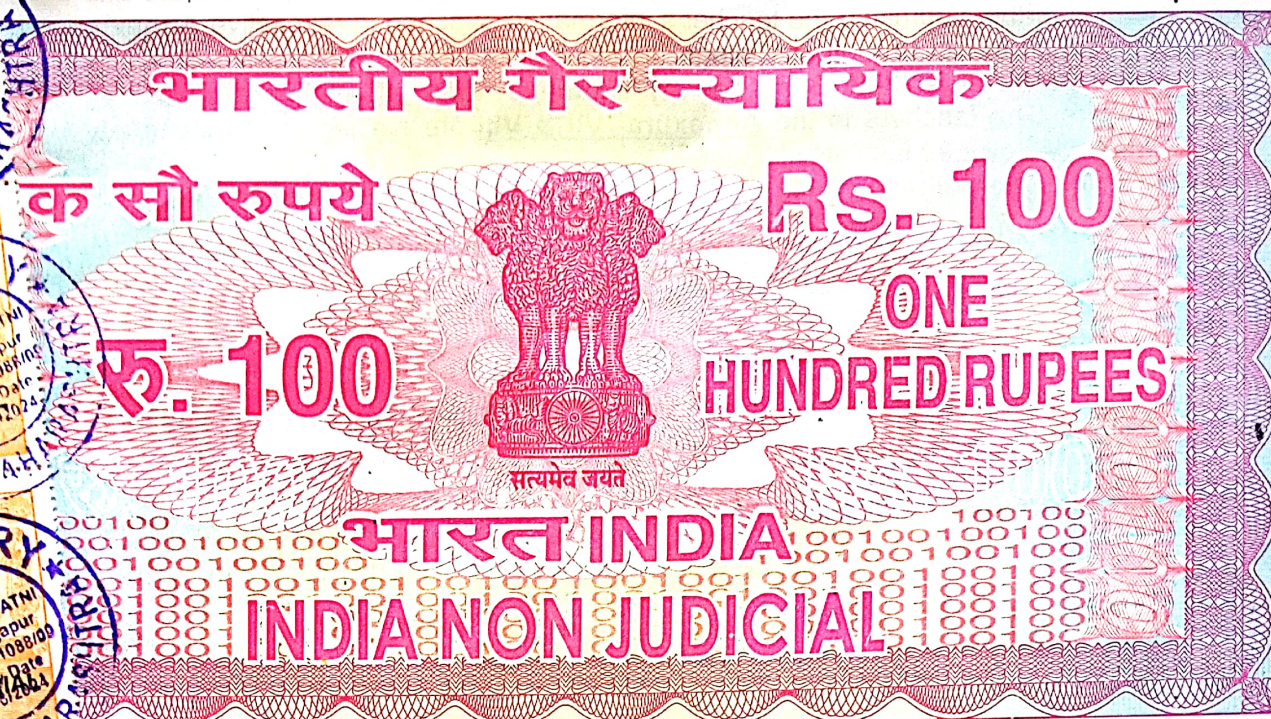


NOTARY
Name: Adv. S. B. PATNI
Area: Vaijapur
Regd. No. 1088/09
NOTARIAL
Date: 20/07/2022
GOVT. OF MAHARASHTRA



भारतीय गैर न्यायिक

क सौ रुपये Rs. 100

₹. 100 ONE HUNDRED RUPEES

भारत INDIA
INDIA NON JUDICIAL

© 2021 ©

ZZ 112242

MAHARASHTRA

उप
कार्यालय
धरमना क.
कोषागाड
वैजपुर
ABD 169
10 JUL 2022
उप कोषागाड अधिकारी
वैजपुर

कृत प्रतिज्ञापनासाठी (अनकडे क्र. ४)

प्रतिज्ञापनाची

प्रति.

मुद्रांक :

मुद्रांक विना बाबतची नोंद व समुद्रमांक/दिनांक

मुद्रांक विकत घेणाऱ्याची सुही

प.मु.वि.सही व प.क्र. - एन बी नॉन जूडिअल ABD196(3106003)

मु.वि.ठिकाण/पत्ता कोर्ट परीसर

श्री. व. शिंदे व सौ. व. शिंदे

६५ व पार

०६३०

Shising

दि ११/०७/२२

NOTARY
Name: Adv. S. B. PATNI
Area: Vaijapur
Regd. No. 1088/09
Expiry Date: 20/08/2024
GOVT. OF MAHARASHTRA

Document Noted & Registered

At. Sr.No. 557/02

Dated. 20/07/22

ANNEXURE- XIII

DECLARATION

(To be prepared on a Stamp Paper Rs.100)

I, the /Principal of the Anand College of Physiotherapy, Vaijapur, Aurangabad 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

BEFORE ME

Adv.S. B. PATNI
Notary Govt. Of Maharashtra
Regd. No. 1088/09

knowledge. 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- VII & VIII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2022-2023, 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 18 day of July 2022 at Vaijapur, Aurangabad

Date : 18/07/2022

Place : VAIJAPUR

Signature of Dean/Principal Name of the
Signatory- **Dr. Rabik Khan**
(with Seal of the College / Institute)



Principal
Anand college of Physiotherapy
Vaijapur Dist. Aurangabad

BEFORE ME

Adv.S. B. PATNI
Notary Govt. Of Maharashtra
Regd . No.1088/09

Page 42 of 42

AFFIDAVIT
I, Rabik Khan
Age 50 Occ Physiotherapist
do hereby State on oath that the contents
of document are true & correct to the best of my
knowledge & belief hence verified
on 18/07/2022 at Vaijapur Dist-A. b. d.

Adv. J. B. PATNI
Notary Govt. Of Maharashtra
Regd. No 1088/09

