



महाराष्ट्र MAHARASHTRA

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सालापूर्व अ. ०४५४ दिनांक ५, ६ २३

वी / स्त्री. गोधीनाथरा रंगजी होम्योपैथिक मेडिकल कॉलेज /

हस्पिटल, सोलापूर सावळगाव

यांनी जनरल स्टॉयम रु. वा मागितलेवरून

हा रु. १०० वा व भरती.२

रु. १०० से जनरल स्टॉयम टिंक

कारण, सादर



श्रीमती खंदार नागुबाई सिध्देश्वर

ANNEXURE-XIII

DECLARATION

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

I, the Principal of the **Gandhi Natha Rangji Homoeopathic Medical & Hospital, Solapur** 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 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-VI** are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year **2024-2025**, as per my knowledge and Information provided by the concerned teachers. The teachers in the Annexure-VI 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** are not practicing in College working hours or out-side the City where the College /Institute is situated.

I 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 **05<sup>th</sup> Dec. 2023 at 04.00 pm**

Date : **05/12/2023**

Place : **Solapur**



**Signature of Principal Name of  
the Signatory- (with Seal of the College / Institute)**



**Dr. Patil S. P.  
Principal**

**Gandhi Natha Rangji Homoeopathic  
Medical College Hospital, Solapur.**