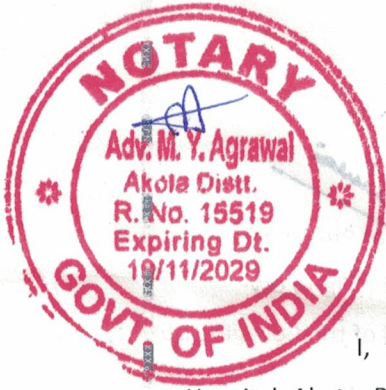


महाराष्ट्र MAHARASHTRA

2024

CS 243510



### DECLARATION

I, the Principal of the **Dr. Sanjaykumar U. Tiwari** Homoeopathic Medical College & Hospital, Akot – Road Akola /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 (a)** 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 (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-VI (a)** are not practicing in College working hours or out-side the City where the College /Institute is situated.

जोड़पत्र - २

दस्तावेज प्रकार/अनुच्छेद क्रमांक -	
दस्त नोंदणी करणार आहेत का ?	होय / नाही
नोंदणी होणार असल्यास दुय्यम निर्बंधक कार्या, नाव-	
मिळकतीचे वर्णन -	Homoeopathic Medical College AWOLA
सोबतला रक्कम -	Ramlal S Laddad
मुद्रांक विकत घेणाऱ्याचे नाव -	
दुसऱ्या पक्षाकाराचे नाते -	7629
हरने असल्यास त्याचे नाव व पत्ता-	
मुद्रांक शुल्क रक्कम -	13/11/2025
मुद्रांक ठिकी नोंदवही अनु. क्रमांक/दिनांक	

K. D. Laddha  
Lic. No. 4/85

मुद्रांक विकत घेणाऱ्याची सही

I further hereby declare that every information or content 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 under signed/the concerned teacher as the case may be, shall be liable for disciplinary action or penal action or Affiliation of the Colleges shall be withdrawal, as the case may be.

This declaration is voluntarily signed by me on 03<sup>rd</sup> day of Feb. 2025 at Akola

Date: 3/2/25

Place: Akola

Signature of Principal

Name of the Signatory-

(With Seal of the College/Institute)

1. Hard copy of this Annexure must be submitted to the University.



Certified that this document / Affidavit contains Pages From 1 to only two

Adv. Mayur Y. Agrawal  
NOTARY 03/02/2025  
GOVT. OF INDIA - 15519  
Infront of Homeguard Office  
Vasant Talkies Road, AKOLA (M.S)

