



महाराष्ट्र MAHARASHTRA

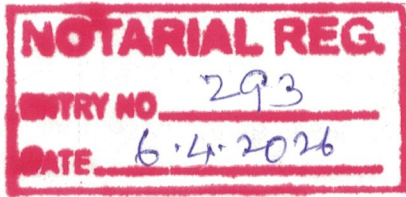
● 2025 ●

55AB 743739

06 JAN 2026

ATD Stamp Head Clerk /

ANNEXURE-XIV



### DECLARATION

I, the Principal of the Indutai Gaikwad – Patil College of Physiotherapy, Dhuti, Nagpur College solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website along with 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 & X are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2026 - 2027, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure-VII, VIII & X 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 & X are not practicing in College working hours or out-side the City where the College /Institute is situated.



1) अनुक्रमांक	9862 / दि 90/21/2026
2) प्रस्ताव प्रकार	शुद्ध
3) स्थान नोंदणी करणार आहेत का ?	होय/नाही
4) मिकळतीचे शोधण्यात येणे	
5) मुद्रांक विक्रेताचे पत्ता	सुद्धा सायबुवाड पाश्चिम पुणे
6) हस्ते असल्यास त्याची पसंती	पुणे
7) दुसऱ्या पक्षकाराचे नाव	
8) मुद्रांक शुल्क रक्कम	90/-
<b>विजय खोळे</b>	मुद्रांक विक्रेता, ला.क्र१७/८६ कोड क्र. ४६०१००६ जिल्हाधिकारी परिसर, त.कार्यालय, नागपूर (शहर)
ज्या कारणासाठी त्यांनी मुद्रांक खरेदी केला त्यांनी त्याच कारणासाठी मुद्रांक खरेदी केल्यापासून ६ महिन्यात वापरणे बंधनकारक आहे.	

कुलकर्णी  
मिर्जापुरी, म

*(Signature)*

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 Tuesday day of 07-04-2026 at Nagpur.

**Date :** 07-04-2026

**Place :** Nagpur

*(Signature)*

Signature of Principal

Name of the Signatory : Dr. Sanket S. Nagrale

INDUTAI GAIKWAD- PATIL  
COLLEGE OF PHYSIOTHERAPY  
DHUTI, NAGPUR



**ATTESTED**

*(Signature)* 6/4/26  
**Adv. Yashwant N. Meshram**  
Advocate & Notary  
District Nagpur (M.S.)

