



महाराष्ट्र MAHARASHTRA

2024

15AB 886351

वेराग दु.नि. कार्या. अ.वि.नं. 9448 दि. 03/02/2024  
श्री. साई होमोपैथी मेडिकल कॉलेज सासुरे  
यांनी रक्कम रु. 900  
मागितलेवरून त्यांना हा रु. 900  
त्यांचे भारतीय रक्कम रु. 900  
असे एकूण नग

चा जनरल स्टॅम्प  
चा एक व वेराग हा 28 JAN 2025  
दे नेटके सी. दास. र.  
कार दिले असे

श्री. रघुनाथ सा. मुसळे  
मुद्रांक विक्रेता प.नं. 92/9296 लोह न. 2403006  
निराग दृष्ट्या निबंधक कार्यालय परिसरात

ANNEXURE- XII

### DECLARATION

I, the Principal of the Sai Homoeopathy Medical College, Sasure (Vairag) Institute 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 teacher's 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.

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 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 04. day of Feb .2025at 3.30 pm

**Date:** 04/02/2025.

**Place:** Sasure, (Vairag)



Signature of Principal  
Principal  
Sai Homoeopathy Medical College  
Vairag, Dist Solapur  
(with Seal of the College / Institute)