महाराष्ट्र MAHARASHTRA ◑ 2024 ◑ CU 998233

24 JAN 2025

मुद्रांक विक्रेत्याचे नांव :- श्री राहुल रंगराव भोसले
व्यवसायाचा पत्ता :- कोडोली. ता. पन्हाळा.
परवाना क्र.:- मु.वि.अ.६७/२००१-०२/दि. १२/२/२००२
मुद्रांक विक्री क्र.:- 99939 कि. रु.- ५००१- दि. ६/२/२०२५
मुद्रांक विकत घेणा-याचे नांव :- Dr. Deepak Patil Nursing Institute Borpadale Phata (Nebapur) Tal. Panhala, Dist. Kolhapur करिता
रक्कम रुपये :- ५००१-
मुद्रांक विक्रेत्याची सही :- नितीन युवराज खडके
मुद्रांक विक्रेता कोड नंबर :- २६७१०१७
रक्कम देण्याचे कारण :- हमीपत्र
मुद्रांक विकत घेणा-याची सही :- श बोरपाडे

SUB-TREASURY OFFICE PANHALA

Sub-Treasury Office Panhala

श्री राहुल रंगराव भोसले मुद्रांक विक्रेता परवाना क्र. ६७/२००१ कोडोली ता. पन्हाळा.

N.Y.K

Dr. Deepak Patil Nursing Institute
Borpadale Phata (Nebapur)
Tal. Panhala, Dist. Kolhapur

ला पन्हाळा.

I, **Mrs. Noorjahan Ismail Patel** the Principal of the **Dr. Deepak Patil Nursing Institute Borpadale, Kolhapur** 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 my knowledge& Belief. 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 & VII** 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 & VII** 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 & VII** are not practicing in College working hours or out-side the City where the College /Institute is situated.

Infrastructure Required as per MSR and Indian Nursing Council Norms is available and we have own building for Nursing Institute or Required Specified Constructed Area as per Norms Laid by Authorities for College and Hostel as per Intake capacity and further No Other Nursing Colleges Running in Same campus or In Same Building

I am further hereby declaring 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 24 day of Feb 2025 at Borpadale, Kolhapur

Date :24/02/2025

Place: Borpadale, Kolhapur

Signature of Principal

Name of the Signatory-

(With Seal of the College/Institute)

Date: 24/2/2025

Dr. Deepak Patil Nursing Institute, Borpadale Tal. Panhala, Dist. Kolhapur

Principal
Dr. Deepak Patil Nursing Institute
Borpadale Phata (Nebapur)
Tal. Panhala, Dist. Kolhapur