



महाराष्ट्र MAHARASHTRA

2022

06AA 753875

जोडपत्र -१
 फक्त प्रमाणित करवासाठी /Only For Affidavit (Article-4)
 १. मुद्रांक क्रमांक /दिनांक अनुक्रमांक/दिनांक :-
 (Serial No. /Date) 13809 - 30/06/23
 २. मुद्रांक विकत करणारे नांव, पत्तिकासाला पत्ता व सही :-
 (Stamp Purchaser's Name, Place of Residence & Signature)
 डॉ. विठ्ठल रघु. ए. गायकवाड
 सो. ए. ए. ए. सिंदे
 ३. परवानाधारक मुद्रांक विक्रेत्याची
 सही व मुद्रांक मारणेचे
 मुद्रांक विक्रेत्याचे नाव/पत्ता

इंजीवन ऑफिस, मुद्रांक व्हेट
 मळी वर्षाक २० - जीप सोसायटी
 शाखा हिंगोली - जी शाखाधिकारी
 न्यायालय, हिंगोली
 परवाना: २१,३०५०३३

District Treasury Office
 HINGOLI.
 0 JUN 2023
 STAMP HEAD CLERK



NOTARY
 Appointed By Govt. of India
 HINGOLI, Dist. Hingoli

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

I, **Dr. Vivek Choukse**, the Dean/ Principal of the **Dr. Hedgewar Smruti Rugna Seva Mandals Dental College and Hospital Hingoli 431513** 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 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 that the teachers information attached in respective **Annexure- VIII & IX** 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- VIII & IX** 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- VIII & IX** are not practicing in College working hours or out-side the City where the College / Institute is situated.

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as the case may be shall be liable for disciplinary action or penal action or Affiliation of the College shall be withdrawn as the case may be.

This declaration is voluntarily signed by me on **11th** day of Dec. 2023 at Hingoli.

Date: 11/12/2023

Place: Hingoli

EXECUTANT
Signature of Dean/Principal
Dr. Vivek Choukse



SIGNED BEFORE ME

Vithalrao P. Gayakwad
Notary Government of India
HINGOLI

IDENTIFIED BY ME