

महाराष्ट्र MAHARASHTRA

2025

DY 778490

व. नं- श्री. गारखनाथ विभागा का बटल

वि. ठिकाण- पंचायत समिती, कडगल.

संकाय नं.- मु. वि. २१/०१ वि. ९-८-२००

दि. ३१/०१/२०२६ ५००/- दि. २९/१२/२०२६

श्री. गारखनाथ विभागा

मुद्रांक वि. नं. १०००

मुद्रांक विकल घेवाव्याची

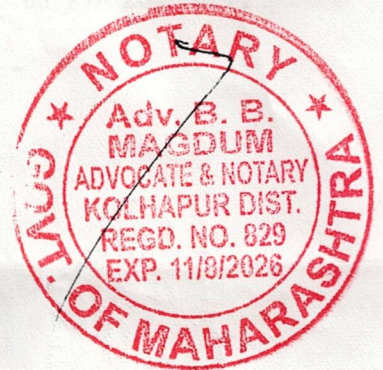


श्री. गारखनाथ विभागा
मुद्रांक वि. नं. १०००
मुद्रांक विकल घेवाव्याची



20 JAN 2026

Sub Treasury Officer
Kagal



DECLARATION

I, the Principal of the Y. D. Mane Institute of Nursing, Kagal, Kolhapur 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 any other 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 where the Institute is situated or adjacent to the city, where the Institute is situated and having the **valid proof of residence** of the said city. The teachers in the Annexure- VI & VII are not practicing in College working hours or out-side the City where the 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 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 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 16th day February of 2026 at 11.30 am.

Date: 16/02/2026

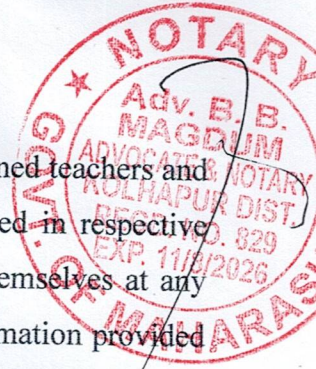
Place: Kagal

Signature Principal

Name of the Signatory - Mr. Juberahamad Sanadi

Principal

**Y. D. Mane Institute of Nursing
Kagal, Tal. Kagal, Dist. Kolhapur**



interpreted, Explained
and Identified by me

Noted and Registered
at Serial No. 597

[Handwritten signature]
MAGDUM

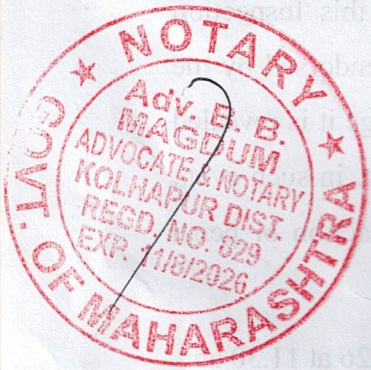
9 MAR 2026

The above named persons
Signed / Affixed L. H. I.
Before me

[Handwritten signature]

B. B. Magdum
Notary
Kolhapur - District

9 MAR 2026



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಜುಬೇರ ಅಹ್ಮದ್ ಸನದಿ
Juberahmed Sanadi
ಜನ್ಮ ದಿನಾಂಕ/DOB: 23/07/1983
ಪುರುಷ/ MALE




6381 6340 6998

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

NOTARY
ADV. B. B. MAGDUM
ADVOCATE & NOTARY
KOLHAPUR DIST.
REGD. NO. 829
EXP. 11/8/2026
GOVT. OF MAHARASHTRA

NOTARY
B. B. MAGDUM
ADVOCATE & NOTARY
KOLHAPUR DIST.
REGD. NO. 829
EXP. 11/8/2026
MAHARASHTRA

ಭಾರತೀಯ ಏಕೀಕೃತ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India



ವಿಳಾಸ:
S/O ಶಮನಾಸಬ್, ಹೋಂ ನಂ 80/6, ಗೋಕಾಕ್ ಫಾಲ್ಸ್,
ಗೋಕಾಕ್, ಬೆಲ್ಗಾವಿ,
ಕರ್ನಾಟಕ - 591308

Address:
S/O Shamanasab, Home No 80/6, Gokak Falls,
Gokak, Belgaum,
Karnataka - 591308



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