

# **ANNEXURE-XVI**

**Declaration by the Dean / Principal of  
the College / Institute**

**Hard copy of this Annexure must be submitted  
to the University**



महाराष्ट्र MAHARASHTRA

01/01/2026

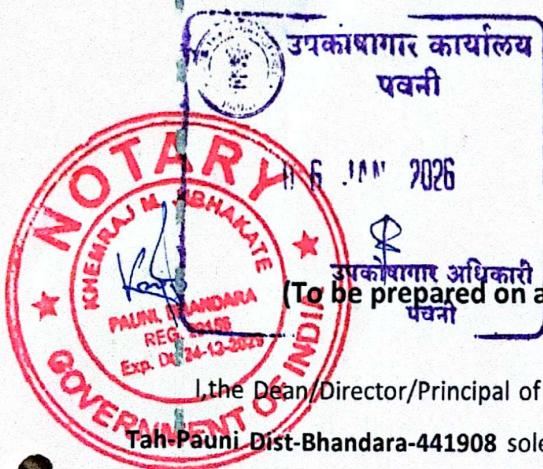
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NOTARIAL REG.  
ENTRY NO. 567  
DATE: 19/01/2026

Annexure- XVI

DECLARATION

(To be prepared on a Stamp Paper of Rs.500 Duly Notarized)



I, the Dean/Director/Principal of the Spandan Nursing College, At-Belati Road, Kondha- Kosra Tah-Pauni Dist-Bhandara-441908 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 the best of 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 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 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 hour so rout-side the city where the College/Institute is situated.

*Kishoraj M. Jibhakate*  
Kishoraj M. Jibhakate  
NOTARY  
Regd. No. 29156  
Kosra Post Kondha Tal.  
Pauni Bhandara

Punamchand Gadeltai  
Stamp Verdi Adyal  
Lic. No 11/2004-05  
Lic. Code No 471

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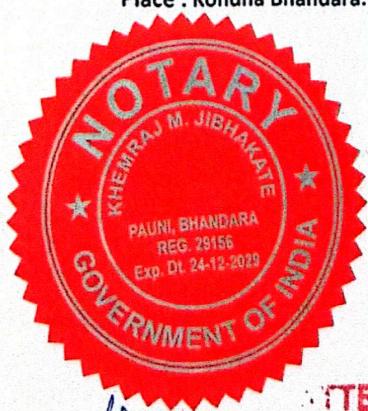
Infrastructure required as per MSR and Indian Nursing Council Norms is available and we have own building for Nursing Institute or Required Specified Constructed Area as per Norms Laid by Authorities for College and Hostel as per Intake capacity and further No Other Nursing Colleges Running in Same Campus 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 penalaction or Affiliation of the College shall be withdrawal, as the case may be.

This declaration is voluntarily signed by me on 19<sup>th</sup> day of January 2026 at Kondha Bhandara.

Date: 19/01/2026

Place : Kondha Bhandara.



Signature of Dean/Principal

Name of the Signatory- *S. Hemraj M. Jibhakate, Spandan Nursing College, Kondha Bhandara, dist. Bhandara, Andhra Pradesh, India*  
(With Seal of the College/Institute)



#### TESTIMONY OF AFFIDAVIT

I solemnly affirm that this is my name and signature / Mark and that the contents of this affidavit are true.

*Khemraj M. Jibhakate*  
Khemraj M. Jibhakate  
NOTARY  
Regd. No. 29156  
Kosara Post Kondha Ta  
Pauni, Bhandara

Signature of Deponent

Signature of Notary

*Khemraj M. Jibhakate*  
KHEMRAJ M. JIBHAKATE  
NOTARY  
PAUNI, BHANDARA (M.S.)