



महाराष्ट्र MAHARASHTRA

2022

09AA 463334

29 APR 2022

अनु.क्र. मेयर दि. मु.शु.रकम. २००१

दस्तावा प्रकार प्रतिज्ञापत्र

तज नोंदणी करणार आहेत का? होय/नाही.

नेळकलीचे वर्णन

प्रतिज्ञा देणाऱ्याचे नांव व पत्ता अखतर हुसेन काश्मी

कम्प ३०१

सी

नांव व पत्ता फिरोज खान १४३०

राहुल एस. नाईक

पत्ताना क्र. २२०११२१

१४१, गुरुवार पेठ, पुणे-४२

वडरेदी केला, त्यांनी त्याच कारणासाठी मुद्रांक

वापरणे बंधनकारक आहे



29 APR 2022



ANNEXURE- XIII

DECLARATION

I, the Dean / Director/ Principal of the ZVM Unani Medical College & Hospital, Pune 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- VII & VIII are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2022-2023, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- VII & VIII 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- VII & VIII 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 withdrawal, as the case may be.

This declaration is voluntarily signed by me on Saturday of 30-04-2022 at Pune.

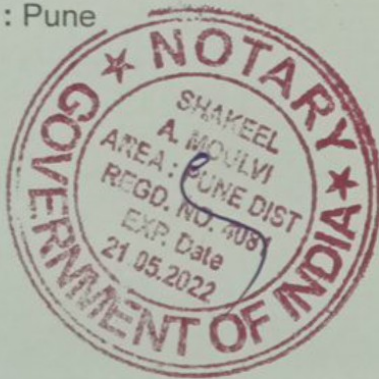
Date : 30-04-2022

Place : Pune

Dr. Akhtar Husain Farooqui
30/4/22

Signature of Dean/Principal
Name of the Signatory-
Dr. Akhtar Husain Farooqui
(with Seal of the College / Institute)

PRINCIPAL & SUPERINTENDENT
Z. V. M. UNANI MEDICAL COLLEGE
& HOSPITAL, PUNE.



BEFORE ME

Shakeel A. Moultvi
SHAKEEL A. MOULVI
NOTARY, GOVT. OF INDIA
PUNE, MAHARASHTRA
Noted and Registered
at Serial Number

860/2022

30 APR 2022