



महाराष्ट्र MAHARASHTRA

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का कारणासाठी प्रत्येकी मुद्रांक टाकी वरती हेद निम्न ल्याव कारणासाठी

सो निम्न क कोठिवास्त जात कारत करायका जात

दस्तावाप्रकार / प्रस्तावना प्रत्येक :

दस्तावाप्रकार / प्रस्तावना प्रत्येक : *moat*

मोठेली कारणात कारणात मुद्रांक किंवात कारणातये तित :

किंवातये तित :

मोठेली कारणात :

मुद्रांक किंवात कारणातये तित व पत्ता : *Marathwada Mitra Mandal*

मुद्रांक प्रस्तावना प्रत्येक : *In Lax & Rudhrami Hospital*

दस्तावाप्रकार / प्रस्तावना प्रत्येक : *V. more*

मुद्रांक मुद्रांक तित :

मुद्रांक किंवात कारणातये तित व पत्ता : *122*

मुद्रांक किंवात कारणातये तित व पत्ता : **31 OCT 2023**

मोठेली कारणात मुद्रांक किंवातये तित / पत्ता : *Chell*

परवर्तना करायका
The Pune Lawyers Consumers
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LIC No. 2201111



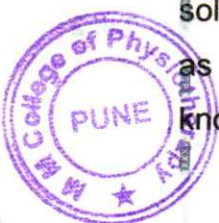
प्रथम मुद्रांक लिपीक
कोषागार पणे करिता

ANNEXURE- XIV

DECLARATION

Physiotherapy Faculty

I, the Principal of the **Marathwada Mitra Mandal's M M College of Physiotherapy, 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 2024-2025**, 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 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 **29th day of January 2025 at Marathwada Mitra Mandal's M M College of Physiotherapy.**

Date : 29/01/2025

Place : Pune



Dr. Syed Zubair Ahmed

**Principal
Principal**

**Marathwada Mitra Mandal's
College of Physiotherapy
Pune-411047**

DECLARATION

Physiotherapy Faculty