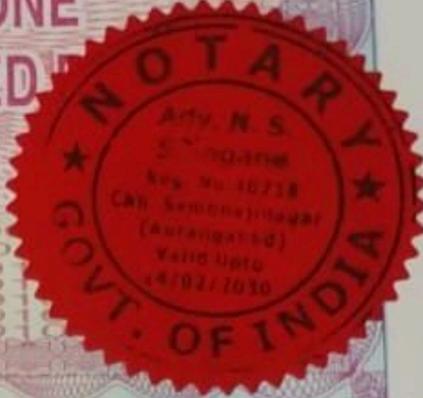


ANNEXURE XVI



MAHARASHTRA अ.क. 2024 दिनांक किमत 39AB 379708
 मुद्रांक प्रदेस व.को.अ. उग्रपती सभा 3049 901010 कोपाकरिता
 मुद्रांक वेकेता एन-५, सिडको उ संभाजीनगर परताना ३ 3101056

Handwritten signatures and text:
 3049 901010
 कोपाकरिता
 MCM Mother Teresa College
 of Nursing

ANNEXURE-XVI

DECLARATION

I, the Dean / Director/ Principal of the MGM Mother Teresa College of Nursing, Chh. Sambhajinagar 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 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 teacher's information attached in respective Annexure-V.II..... & X.II.(a)(b) are not working in / at any other College /Institute 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- V.II..... & X.II.(a)(b) 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- V.II..... & X.II & (a)(b) are not practicing in College working hours or out-side the City where the College /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 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 25 day of Feb 2026 at Chh. Sambhajinagar.

Signature of Dean / Principal

Name of the Signatory- Dr. Satishchandra T. Buyite

Date: 25/02/2026.

Place: -Chh. Sambhajinagar.

AFFIDAVIT

sworn and affirmed before me by
Smt. Satishchandra T. Buyite
Age: 45 .000 .00
R/O: 25/02/2026
Q: 60
Identified by ..
I know He / She personally
and verified on 25/02/26

BEFORE ME

26/02/26

Adv. Nita Shamsundar Shingane
Notary Govt. of India Reg No. 40718
Dist. Chh. Sambhajinagar Aurangabad
Maharashtra) Mob No 95074861

