



शालीनीताई मेघे आयुर्वेदिक कॉलेज भिलेवाडा भंडारा भा. विष्णु पंचबुधे  
महाराष्ट्र MAHARASHTRA 2025 57AB 811464

निशांत न. पेश्राम  
स्टॅम्प व्हेंडर भंडारा  
ला.क्र. १२४२/२०१४  
मुद्राकाचा उपयोग

क्रमांक - ११८७  
किंमत १००  
दिनांक - ४/३/२०२६  
प्रतिष्ठापन

VISHWAS

Treasury Officer
Bhandara
Date of Issue
26 FEB 2026

**NOTARIAL REG.**  
ENTRY NO. 343/2026  
DATE: 05/03/2026

**DECLARATION**

I, the Dean/Director/ Principal of the Smt. Shalinitai Meghe Ayurved Medical College Hospital & Research Center, Bhilewada Bhandara 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 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- IV 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- IV are staying in the same city or adjacent to the city, where the College/Institute is situated and having the valid proof of

05 MAR 2026

residence of the said city. The teachers in the Annexure- IV are not practising 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 Wednesday day of 04 March 2026 at Smt. Shalinitai Meghe Ayurved Medical College Hospital & Research Center, Bhilewada Bhandara.

Date : 04/03/2026

Place : Bhilewada Bhandara

*Dakhole*  
4/3/26

Signature of Dean/Principal

Name of the Signatory-

*Dr. Pradnya P. Dakhole*

**Principal**

(with seal of the College / Institution)

**Smt. Shalinitai Meghe Ayurved  
Medical College, Hospital &  
Research Center. Bhandara**



Attested on the Basis of Admission and Identification without Prejudice to the Rights of Parties and Subject to Proof Of Execution Before Competent Court



This Declaration is  
Executed by Shalinitai Meghe  
Identified by Amasankar Nimoge  
Before me *Bhandara*  
*[Signature]*  
**VISHWAS G. TAWALE**  
NOTARY  
BHANDARA(M.S.)



05 MAR 2026