

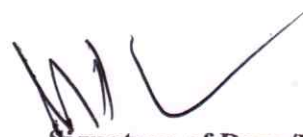
DECLARATION

I, the Dean / Director/ Principal of the.....Sarjee Hospital HRB) Akode
Training Centre / Institute solemnly states on affirmation, that the information provided by me in
Inspection Format as well as uploaded on Training Centre 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-F. & G.** are not working in / at any other Training Centre /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-F. & G.** are staying
in the same city / town / village where the Training Centre/ Institute is situated or adjacent to the
city / town / village, where the Training Centre /Institute is situated and having the valid proof of
residence of the said city / town / village. The teachers in the **Annexure-F. & G.** are not practicing in
Training Centre working hours or out-side the City where the Training Centre /Institute is situated.

I am further hereby declare that every information or contents in this LIC 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 Training Centre shall be withdrawal, as the case may be.

This declaration is voluntarily signed by me on 19..... Day of May, 2022 At.....

Date: 20/05/2022
Place: Mumbai



Signature of Dean/Principal/Director
Name of the Signatory
(With Seal of the Training Centre)

