

## **DECLARATION**

I, the Dean of the Bombay Hospital Institute of Medical Sciences solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website alongwith 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 teachers information attached in respective Annexure- I & III are not working in / at any other College /Institute or presented themselves at any inspection for the Agademic Year 2025 – 2026, as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure- I & III 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- I & III are not practicing in College working hours or out-side the City where the College /Institute is situated.

जोडपत्र-१ Annexure -ককল ঘৰিক্সাণসামাতী Only for Afidavit मुद्रांक विकत् घेणाऱ्याचे नाय \iint 🗸 mo मुद्रांक विद्वार के हिन्दू रही है जिस माना मुद्रांक विक्रियादत्वी नींद वही अलु. क्रमांक रक मुद्रांक विकित्याची सही मुद्रां ५ विकत घेणाऱ्यावी टाही ही. डी. पाटणकर परवाना क्रमांकः : ८००००२४ मुझंक विकाय विकाय पता : दि बॉक्चे मेट्रोपोलिटीन भेजिस्ट्रेटस कोर्टस् बार असोसिएशन एरप्लेमंड कोर्ट, महापालिका मार्ग, मुंबई - ४०० ००१. शासकीय कार्याकवासगीर/कार उत्पाद में हुनिया जादर करणेसाठी मुद्रांक कागदाची आवश्यकता नाही. (U.S.) ३११ - १. ५५/०७/२००४) नुसार ज्या कारणाठाठी ज्यांनी सुग्रांक ठारेदी केला त्यांना त्यांच कारणा**साठी सुद्रांक खरे** केल्बापासून धमहिन्यात वापरणे बंधनवारक आहे.

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 06th February 2025.

Date: 06/02/2025

Place: Mumbai

S.M.H. ZAIDI

Mumbai & Thane Dist.

Reg.No. 3640

My Commission

Expires Sept 2026 Signature of Dean

Name of the Signatory- Dr. S. V. Khadilkar

(with Seal of the College / Institute)

Dr. S. V. Khadilkar MD DM DNBE FIAN FICP FAMS FRCP (London)

Bombay Hospital Institute of Medical Sciences 12, New Marine Lines, Mumbai - 400 020

NOTED & REGISTERED Sr. No. 502 Page No. 35 Book No. O. . 7. . Date .....

S. M. H. ZAIDI NOTARY Government of India Mumbai & Thane Dist