



Affiliated College By Government Of Maharashtra

Affiliated College By Maharashtra University Of Health Sciences, Nashik.

**PRUTHVIRAJ DESHMUKH COLLEGE OF  
PHYSIOTHERAPY, LOHARA , YAVATMAL.**

INFRONT OF I.M.A HALL , DARWHA ROAD , LOHARA , YAVATMAL –445001  
College code – 06285, EMAIL- [pdhpthyt12021@gmail.com](mailto:pdhpthyt12021@gmail.com), [pruthvirajdcop2021@yahoo.com](mailto:pruthvirajdcop2021@yahoo.com)

**ANNEXURE-XVII**

-

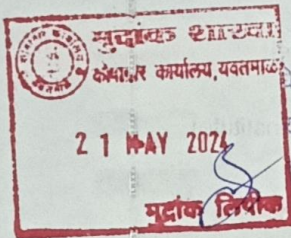
**DECLARATION**



महाराष्ट्र MAHARASHTRA

© 2023 ©

81AA 638019



क्र. 80819 दिनांक 21/5/2024

नाम प्रुथ्विराज देशमुख कॉलेज ऑफ फिजिओथेरापी

यवतमाल

मु. वि. प. क्र. ७ व ८/८८

डॉ. डी. गुल्लाने

मु. वि. प. क्र. ७ व ८/८८

जिल्हाधिकारी कार्यालय, यवतमाल

ANNEXURE- XVII

### DECLARATION

I, the Dean / Director/ Principal of the Dr D.Shivaganesha Balasubramaniam of Pruthviraj Deshmukh College of Physiotherapy Yavatmal.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 teachers 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 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



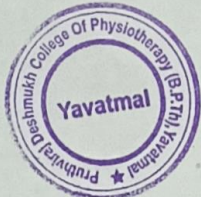
said city. The teachers in the Annexure- VII & VIII are not practicing in College working hours or out-side the City where the College /Institute is situated.

I 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 13.. day of FEBRUARY 2024 at Pruthviraj Deshmukh College Of Physiotherapy Yavatmal.

**Date : 13/02/2024**

**Place : Yavatmal.**



Signature of Dean/Principal

Name of the Signatory-

(with Seal of the College / Institute)

**Principal  
Pruthviraj Deshmukh College Of  
Physiotherapy(B.P.Th.) Yavatmal**