

Appointment Order

To,

.....
MS. Gumpaya, R. chopade,
Thome,
.....

Subject: Appointment on the post Principal.....

Sir / Madam,

With reference to your application dated 18/10/2026 in response to our Advt. dated 03/10/2026 and subsequent interview held on 12/02/2026.....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Principal.....

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

2) You are appointed in the pay scale of Rs. 1,00,00,00/- With starting pay of Rs. 1,00,00,00/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.

3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.



Yours faithfully,

Chopade

President / Secretary /
Principal, Dean or Director
(Any one competent authority to sign the appointment order)

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal

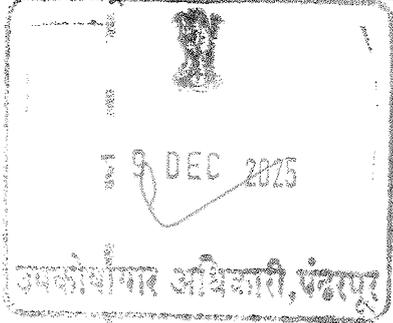
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

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पंढरपूर विक्री नं. ४५५०८ तारीख २१/१०/१९
श्री. _____
रा. _____
चा मागितलेवरून हा रु. _____
चा भारतीय रुपये _____



Handwritten notes and signatures on the right side of the stamp, including '२५०९' and '१०९'.

प्रफुल्ल यां. नगरदार स्टॅम्प व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Handwritten signature: *Shri. K. K. K.*

Handwritten signature: *Shri.*

Format of Bond of Service

I/Mr/Mrs... Gunpriya. R. chopade..... age 56. years,
permanent resident of Thane G.B. Road..... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime ...Principal.....
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide appointment order No. SFCT/110N/40/2026 dated 12/02/2026... in the pay scale / consolidated pay as 1,00,000/-.....

II) That, I was joined / am joining on the said post from OBAN..... subject to the approval to my appointment from the University. (Nursing)

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs. Gumpriya Chopade..... am signing

This document on this 12th Day of Feb 2026 At Pandharpur

Date: 12/02/2026

Signature Chopade

Place: Pandharpur

(Name)

Mrs. Gumpriya R. chopade

1) Signature of Witness..... Satish.....

Name and Address of Witness..... Mr. Satish Ahule.....

2) Signature of Witness..... Rohit.....

Name and Address of Witness... Mr. Rohit Pawar.....

Acceptance of the Appointment

Dr _____

From : Mrs. Gumpriya, R. chopad
aB Road, Thame,

(Full resi. Add)

Date : 12/02/2026

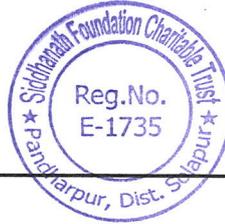
To,

Principallifeline Institute of Nursing**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/LION/40/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

(Chopade)

Appendix - VI

Joining Report

Dr _____

From : Mrs. Gumpriya, R.
Chopade,
aB Road, Thame

(Full resi. Add)

Date : 12/02/2026

To,

Principallifeline Institute of Nursing**Subject : Joining Report****Reference : Your appointment order No. SFCT/LION/40/2026 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Principal in the subject of OBG & Nursing w.e.f. (before noon / afternoon).

Chopade

Yours faithfully,

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur(Chopade)Allowed to join

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Mrs. Gumpriya . R. chopadeResident of (Permanent home Address) GB Road ThanePresently residing at (Present home Address) GB Road Thane

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of OBG (Nursing) at Lifeline Institute of Nursing
(Name of the college)

2. My working hours at the College are from 9.00 AM to 5.00 PM
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing Not Practicing
5. If practicing, the place of practice is —
6. My practicing hours are from — to —

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature —Place : PandharpurName : Mrs. Gumpriya . R. chopade,Designation : Principal,Date : 12/02/2026Countersigned by Dean / Principal —Place : PandharpurName : Gumpriya chopade,

(To be typed on Plain Paper)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



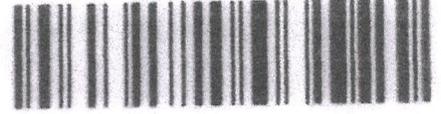
भारत सरकार

GOVERNMENT OF INDIA



गुणप्रिया राष्ट्रोद्धार चोपडे
Gunpriya Rashtrouddhar Chopade
जन्म वर्ष / Year of Birth : 1967
स्त्री / Female

6467 1118 8567



आधार – सामान्य माणसाचा अधिकार



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
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भारतीय विशिष्ट ओळख प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता : विजय पार्क बिल्डिंग नं.-१९ फ्लॉट नं.-२०४, कासारवडवली घोडबंदर रोड,
हायपरसिटी मॉल जवळ, कासारवडवली, ठाणे, महाराष्ट्र, 400601

Address : Vijay Park Building No.-19 Flat No.-204, Kasarvadavali Ghodbandar
Road, Near Hypercity Mall, Kasarvadavali, Thane, Maharashtra, 400601

Aadhaar - Samanya Maansacha Adhikaar



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

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MAHARASHTRA NURSING COUNCIL, BOMBAY.
CERTIFICATE OF REGISTRATION

Registration No. T-36234

This is to certify that

Shri/Smt./Kum. Gunpriya D. Jalvi

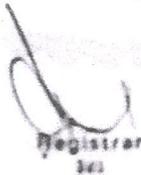
Possessing the qualification of / Having passed the examination of
General Nursing has been duly registered under the
Maharashtra Nurses Act, 1966 (Mah. XL of 1966), in Part 7 of the
Register for Greater Bombay Region in Section 1 as a
registered Nurse

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Bombay, and the signature of the Registrar.

Subject to the provisions of the said Act.

this certificate is valid upto 30.11.19

Dated the 5th of October 1966


Registrar


President

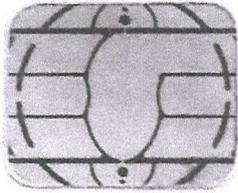


Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



MAHARASHTRA NURSING COUNCIL

Registration Certificate



Registration No.
I-36234

0093669



Cardholder Name

GUNPRIYA RASHTROUDHAR CHOPAL

Shubha

Date Of Issue

Valid From

Valid Upto

REGISTRAR
MNC

05/10/1988

OCT-1988

MAR-2022



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



NAAC ACCREDITED

We the Chancellor, Vice Chancellor
and Members of the Management Council of the
Shreemati Nathibai Damodar Chackersey
Women's University, Mumbai,

certify that A. Chopade the withinsigned

Chopade Sunpriya R.

having been examined for the Degree of
Master of Science (Nursing) in May 2004 and adjudged
to have passed in the B Grade, the Degree of

Master of Science
Nursing

(Faculty of Nursing)

has been conferred on her at Mumbai on the Sixteenth day
of the month of March in the year two thousand five

In Testimony whereof are set the Seal of the said University
and the Signature of the said Vice-Chancellor.

Chopade
Principal

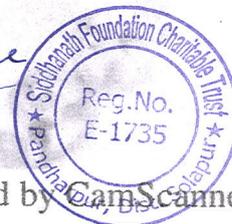
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Vice-Chancellor

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



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101-03

Tele. : 4933333 (7 Lines)

Cables : JASLOK

Cumballa Hill

Bombay - 400 026.

Jaslok Hospital & Research Centre

18, DR. G. DESHMUKH MARG, BOMBAY - 400 026.

Telex : 011-75743 JASH IN

Fax : 91-22-4950508

Ref JH/30077/23.

Date 7/2/96.

Miss Gunpriya Salvi,

~~XXXXXXXXXX~~ Sister Tutor :

Madam,

Further to our letter No: JH/30077/8.

dated 11/1/95. We have to inform you that, the Management of this Hospital and Research Centre is pleased to confirm your services from 7/1/96.

The other terms and conditions will remain unchanged.

JASLOK HOSPITAL & RESEARCH CENTRE

Alexander
(MRS. M. ALEXANDER),
D.N.S.

M.P. Lekhi
(M. P. LEKHI),
MEDICAL SUPERINTENDENT.



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

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Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



JASLOK HOSPITAL

Jaslok College of Nursing

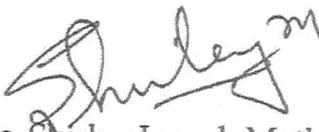
Date: 18/7/2011

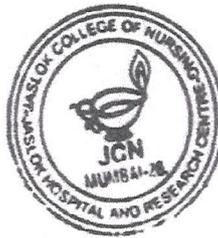
TO WHOMSOEVER IT MAY CONCERN

Mrs. Gunpriya Chopade has worked as a Staff Nurse at Jaslok Hospital and Research Centre for 3 ½ years from February 1989 to June 1992. After her Post Basic BSc Nursing she was promoted as a Sister Tutor in the School of Nursing from June 1994 to June 2002.

After completion of MSc Nursing (Obst. and Gyn. Nursing) she continued to be a Sister Tutor/ Clinical Instructor in the School of Nursing and thereafter in the same post in the College of Nursing from 2006 - 2008. From July 2008 she was promoted as a Lecturer and worked in Jaslok College of Nursing till April 2011.

Wish her success in all her future endeavours.


Mrs. Shirley Joseph Mathew.
Principal





Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Jaslok Hospital and Research Centre, 15, Dr. G. Deshmukh Marg, Mumbai - 400 028.
Tel.: (22) - 6657 3333, Fax : (22) - 2352 0508, E-Mail: info@jaslokhospital.net
Website: <http://www.jaslokhospital.net>

"Non-Profit Institution and a member of the Association of Hospitals"


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
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No. AHIRC/HR/RL/2015/153

Date: 30th April 2015

CERTIFICATE OF RELIEVING

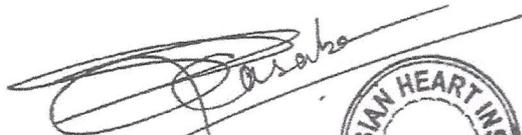
This is to certify that Mrs. Gunpriya Chopade was working as Deputy Director from 18th March 2014 to 30th April 2015. At the time of leaving the company, she was working as Deputy Director in the department of Nursing.

She has left Company on her own accord and her last working day was 30th April 2015.

During her tenure, we found her to be honest and sincere. Her conduct was satisfactory during this period.

We wish her all the best in her future endeavors.

For Asian Heart Institute


Authorized Signatory 




Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Every heart 
Principal



No.SHREEKA/HR/RL2017/003

Date: 4/4/2018

EXPERIENCE CERETIFICATE

This to certify that Mrs.Gunpriya Chopade was working as **Nursing Director** From **Date-4th May 2017** till date. At the time of Leaving the Company, she Was working as **Nursing Director** in the department of **Nursing**.

She has left company on her own accord.

During her tenure, we found to be Honest, Sincere and Hardworking. Her conduct was satisfactory during this period.

We wish her all the best in her future endeavors.

For SHREEKA HELTHCARE

Authorized signatory
Dr.Swapnil Jathar, M.D



Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
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Phone : 2826 7500
Ext. : 653, 566

COLLEGE OF NURSING
Dr. BALABHAI NANAVATI HOSPITAL

S V ROAD, VILE PARLE (WEST), MUMBAI - 400 056.
Web : www.nanavatihospital.org

Appointment Order

BNH/C/ 050/2012

5.4.2012

To,
Mrs Gunpriya R. Chopade,
Vijay Park, Building no. 19,
Flat no. 204, 2nd floor,
Kasar Vadavali,
Ghodbander Road,
Thane (W) - 4000601.

Subject : Appointment Order for the Post of **Principal cum Professor**

Reference : Staff Selection on 5.4.2012

With the recommendation of Staff Selection committees decision you appointed on the post of Principal cum Professor in College of Nursing, Dr. Balabhai Nanavati Hospital, S. V. Road, Vile Parle, Mumbai - 400056 with effect from 6.4.2012

You are instructed to join immediately.

centisa

Dr. Ashok Hatolkar
Secretary
College of Nursing
Dr. Blabhai Nanavati Hospital

I accept the services on the terms & conditions as framed by the management

Date : 6/4/2012



Chopade
Signature

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
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Pandharpur, Dist. Solapur

LETTER OF APPOINTMENT

No. AHIRC/STFF/567/2014

Date: 18th March 2014

Dear Ms. Chopade,

With reference to your application and the subsequent interview with the selection committee, AHIRC, Mumbai, we are pleased to offer you an appointment as **Deputy Director** in the department of **Nursing**. On a monthly CTC of **Rs. 75,000/-** in the **Grade M3**. You will be entitled to all allowances and benefits as per the annexure attached. We take this opportunity to congratulate you on your selection and look forward to a long and mutually beneficial association. We trust our relationship will be guided by a quest for excellence in all facets as well as based on a foundation of mutual respect and sincerity in all dealings. Welcome aboard!

The appointment is subject to the submission and verification of the following documents

- a) Proof of age
- b) Relieving letter from previous employer
- c) Attested copies of degree/diploma certificate/educational qualification
(Bring original certificates for verification)
- d) Nomination for P/F, Gratuity etc. (Will be furnished by the organization)
- e) Last salary certificate
- f) Residential and Current Address Proof
- g) Pan Card / Photo Identity
- h) 4 Photographs

Commencement of employment

Your Date of Joining is 18th March 2014.

OFFICIAL DUTIES

For all functional and administrative purposes you will report to the Head of the Department / Chief Executive Officer/ Medical Director or any other officials appointed by the management.

The appointment carries with it the liability to serve in any department / section / location / establishment and/or in any shift or in any such establishment which may be newly set up in future. Upon transfer, you will be bound by the service conditions / work practices prevailing in the transferee location / establishment. You shall abide by the timings of the institute.

Whenever and wherever needed, you may be called on emergency duty, while not on duty/off duty or may be required to stay beyond working hours in the interest of the patients.

Probation

You will be on a probation period of 6 (six) months from the date of your joining and Management reserves the right to extend the same for a further period of 6 (six) months. You may be confirmed thereafter based on your performance during the probation period. In the event your performance is not found to be satisfactory during the period of probation, your period of probation shall automatically come to an end. The Management may, however, at its discretion extend your probation period for a further period as specified in order to give you an opportunity to improve upon your deficiencies in your performance. Unless and until you are confirmed in writing by the management by issuing a letter to that effect, you shall continue to be under probation.

ms



Every heart *Chopade*
deserves the best
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Asian Heart Institute & Research Centre Pvt. Ltd.

G/N Block, Bandra-Kurla Complex, Bandra (East), Mumbai - 400 051

Tel: + (91-22) 6698 6666 • Fax: + (91-22) 6698 6506 • E-mail: info@ahirc.com • Website: www.asianheartinstitute.org

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Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

ITM Institute of Health Sciences
Institute for Technology and Management

Plot no 11 Sector 12, New Panvel (E), Raigad Dist. Maharashtra - 410 206
Contact: 022 64506859 e www.itm.edu



Ms. Gursriya Chopade
ITM / Navi Mumbai

Ref.: PER/ITMIHS/0618/HR
Date: 20th June 2018

Letter of Appointment at ITM Group of Institutions

Dear Ms. Chopade

Further to our Offer Letter dated 4th June 2018 (Ref No. OFFR/ITMIHS/0618/HR) you are appointed as **Associate Professor in Nursing** Department in Grade JB w.e.f 19th June, 2018 in the terms and conditions stipulated herein.

Salary & Benefits

- a) Your compensation on a cost to company basis has been fixed at **Rs 6,00,000** (Rupees Six Lakhs Only) and is structured as mentioned in Annexure A.
- b) Salaries, Allowances, Facilities and other sums payable under this appointment are subject to Income Tax and you shall be liable for the same.
- c) The Management views the salary offered to you as an extremely confidential matter and any leakage of the same shall be viewed as a serious breach of this confidence at your level.

Work Place

Your initial place of posting will be **Panvel**. However, you are liable to be transferred to any department of the organization, existing or to be set up at any other location in India or abroad, temporarily or permanently.

Probation

You will initially be on probation of **6 (Six) months**, which may be extended or reduced at the sole discretion of the management. Please refer to the Separation Policy for further details.

Confirmation

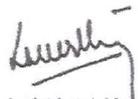
On successful completion of Probation or any extension thereof, you will be confirmed in the services of the Organization. Confirmation shall take effect only upon issue of confirmation letter and from the date given in the letter. For details on separation after confirmation, please refer to the Separation Policy applicable to your grade. If you are a teaching staff, in case of Separation, you will not be permitted to leave the organization during an academic semester.

Service Conditions

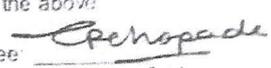
In addition to the above, you will be governed by the conditions as mentioned in Annexure B and Employment Agreement. The Organization, however, reserves the right to add, alter and amend the said service conditions as may be considered necessary from time to time.

We welcome you as a member of our Organization and look forward to your long and meaningful association. Kindly return the duplicate copy of this letter and Annexures, duly countersigned at the places provided therein, in token of your confirmation of your having read and accepted the same.

Yours faithfully
For ITM Group of Institutions


Lakshmi Murthy
Chief People Officer

I confirm and accept the above

Signature of Employee: 

Date: 27th June 2018



ITM Group of Institutions

- Navi Mumbai
- Chennai
- Oshiwara
- Nagpur
- Vadodara
- Warangal
- Dombivli
- Nerul
- Raipur
- Raipur
- Noida
- Panvel
- Visakhapatnam


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No: 10488
is certify that the Registration of
Smt. Gunpriya D. Salvi

renewed upto 30-3-1997
Receipt No. & Dt. 17079/141-92

Registrar
Maharashtra Nursing Council, Bombay.

No: 9975
to certify that the Registration of
Smt. Gunpriya D. Salvi

renewed upto 30-3-2002
Receipt No. & Dt. 92342/6297

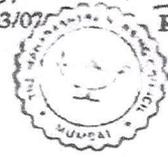
Registrar
Maharashtra Nursing Council Mumbai.

No. ... 10488
Regn. No. (s) 1-36234, XV-30113
This is to certify that the Registration of
Smt. Gunpriya R. Chopade
Nee Gunpriya D. Salvi
renewed upto 30-3-2007
Receipt No. & Dt. (14013) 412102
REGISTRAR

REGISTRATION OF THE HOLDER OF THIS CERTIFICATE

Renewal Slip [Rule 79(2)]

Renewal No. 26509
Regn. No. (s) I-36234, XV-30113
This is to certify that the registration of
Shri/Smt. GUNPRIYA DADABHAUSALVI
is renewed upto 30/03/2012
Receipt No. 10697
and Date 01/03/07
REGISTRAR



1417

Renewal Slip [Rule 79(2)]

Renewal No. 416
Regn. No. (s) I-36234, XV-30113
This is to certify that the registration of
Mrs. CHOPADE GUNPRIYA RASHTROUDHAR
nee Ms SALVI GUNPRIYA DADABHAU
is renewed upto 30/03/2017
Receipt No. 78260
and Date 06/01/12
REGISTRAR



Renewal Slip [Rule 79(2)]

Renewal No. 20170159793
Registration No. (S) I-36234, XV-30113
Receipt No. & Date REG/OPR/1718/31032 29/04/2017
This is to certify that the registration of
Mrs. CHOPADE GUNPRIYA RASHTROUDHAR
Nee. Miss. SALVI GUNPRIYA DADABHAU
is Renewed upto 30/03/2022
REGISTRAR

Note: Please attach this slip on the back side of your registration



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MAHARASHTRA NURSING COUNCIL, BOMBAY.

CERTIFICATE OF REGISTRATION

Registration No XV-30113

This is to certify that

Shri/She/ Kum. Ganpriya D. Salvi

~~possessing the qualification of~~ / Having passed the examination of
Midwifery has been duly registered under the

Maharashtra Nurses Act, 1966 (Mah. XL of 1966), in Part I of the

Register for Greater Bombay Region in Section XV as a
registered Midwife

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Bombay, and the signature of the Registrar.

Subject to the provisions of the said Act.

this certificate is valid upto 30-3-92

Dated the 4th of May 1989


Registrar

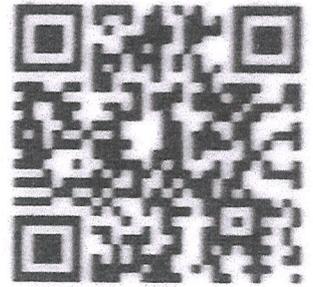

President



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Principal
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MAHARASHTRA NURSING COUNCIL SMART CARD



- Do not bend card • Do not remove and re-insert card unnecessarily
- Never submerge card in liquid or use cleaning fluids on it

This Card remains the property of
MAHARASHTRA NURSING COUNCIL,
to whom it must be returned upon request, or if found
5th Floor, Bombay Mutual Annexe, Gunbow Street,
Opp. Residency Hotel, Off D.N. Road, Fort, Mumbai-400001.
Contact No- 022-22377990, 022-49183300.
E-mail: mncouncilreg@gmail.com
Website: www.mahashtranursingcouncil.org



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The Trained Nurses'
Association of India

LIFE MEMBERSHIP CARD



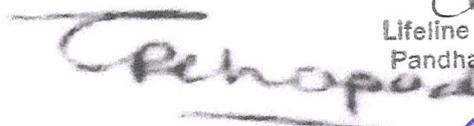
GUNPRIYA R.CHOPADE

TNAI NO.: 34003/LMT

Enrolment Date : August 26, 1988

Date of Birth : September 17, 1967


Secretary General


Member's Signature


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Pandharpur, Dist. Solapur




Principal
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Pandharpur, Dist. Solapur



The Trained Nurses' Association of India

L-17, Green Park (Main),
New Delhi- 110 016.

Tel.: 91-11-26566665, 26534765

Telefax : 91-11-26858304

Email: tnai_2003@yahoo.com
tnai@ndf.vsnl.net.in

Website: www.tnaionline.org

INSTRUCTIONS FOR MEMBERS'

1. This card should be presented on request.
2. Please quote your TNAI NO. in all Communications with TNAI HQRS.
3. Inform the TNAI HQRS. if the card is lost.
4. Duplicate Card will be issued on payment.
5. Carry TNAI Card while visiting TNAI Hqrs.

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University of Mumbai
मुंबई विद्यापीठ

C. P. S.
the Chancellor, Vice-Chancellor
and
Members of the Management Council
confer the Degree of
Bachelor of Science
(Nursing - Post Certificate)
on
Salvi Gunpriya Dadabhau
the Institute of Nursing Education
in the **First Class**
for the examination held in April 1994
at the Convocation
held on 5th February, 2011.

आम्ही,
कुलपती, कुलगुरु
आणि
व्यवस्थापन परिषदेचे सदस्य
विज्ञान स्नातक
(परीचर्या-प्रमाणपत्रोत्तर)
ही पदवी
एप्रिल १९९४ मधील परीक्षेत
प्रथम श्रेणीत उत्तीर्ण झाल्याबद्दल
साळवी गुणप्रिया दादाभाऊ
इन्स्टिट्यूट ऑफ नर्सिंग एज्युकेशन
यांना
५ फेब्रुवारी, २०११ च्या
दीक्षान्त समारंभात प्रदान करित आहोत.



BSNP-11-281-00008-00009

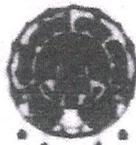
Shreed
Vice-Chancellor / कुलगुरु

1135539



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Pandharpur, Dist. Solapur



MUMBAI - 400 020.

05/07/2004

Certificate of Statement of Marks

Master of Science (Nursing) Examination: May 2004

Name: CHOPADE GUNPRIYA R.

Medium: English

Seat No: 00401

Centre: 04 CHURCHGATE

Per.Reg.No: 18-02-00003-E

Institution: 005:LEELABAI THACKERSEY COLLEGE OF NURSING, CHURCHGATE, MUMBAI

Code	Subject name	External	Internal	Total	Grace
SEMESTER I					
1101	FOUNDATION OF EDUCATION	56/100	16/025	072/125	
1102	COMPREHENSIVE NURSING-I	58/100	31/050	089/150	
1103	PRINCIPLES AND PRACTICE OF MANAGEMENT	61/100	28/050	089/150	
1104	GUIDANCE AND COUNSELLING	30/050	18/025	048/075	
1105	STATISTICS	25/050	20/025	045/075	*
SEMESTER II					
2101	NURSING EDUCATION-I	60/100	29/050	089/150	
2102	COMPREHENSIVE NURSING-II	57/100	31/050	088/150	
2103	RESEARCH METHODOLOGY	53/100	15/025	068/125	
2104	MANAGEMENT IN NURSING SERVICES	55/100	31/050	086/150	
2205	COMPREHENSIVE NURSING (PRACTICAL)	30/050	28/050	058/100	
SEMESTER III					
3101	NURSING EDUCATION -II	63/100	30/050	093/150	
3102	MANAGEMENT IN NURSING EDUCATION	60/100	30/050	090/150	
SEMESTER IV					
*4117	OBSTETRICAL AND GYNAECOLOGICAL NURSING - I	67/100	37/050	104/150	
*4127	OBSTETRICAL AND GYNAECOLOGICAL NURSING - II	65/100	34/050	099/150	
*4207	OBSTETRICAL AND GYNAECOLOGICAL NURSING (PR)	35/050	32/050	067/100	
*4130	THESIS	71/100	--	071/100	
*4230	VIVA VOCE	36/050	--	036/050	

Grand Total: 1292/2100

Percentage: 61.52

Result: Passes in B Grade

A student must secure a minimum of 50% marks for passing in each subject.

Marks % Grade Description

74 & above	D	Out Standing
66 - 73	A	Very Good
58 - 65	B	Good
50 - 57	C	Fair
Below 50	D	Poor

Note: (1) PP=Pen Ex=Exempted CS=Correspondence Student RR=Result Reserved AB=above FF=Failed
 *Indicates current appearance-Indicates grace marks given

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 Pandharpur, Dist. Solapur

OFFICE OF COLLECTOR
BOMBAY CITY & BOMBAY SUBURBAN DISTRICT
(Magisterial Branch)

Old Custom House, Shahid Bhagatsing Marg, Bombay 400 023.

No. EM/SC/79/88

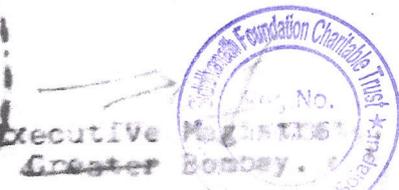
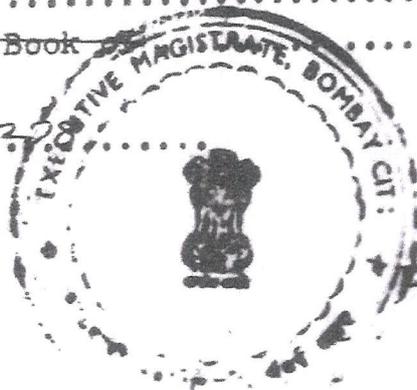
19-12-1988

C A S T E C E R T I F I C A T E

This is to certify that Shri/Smt./Kumari GUNPRIYA.....
DADABHAU SALVI.....
son/daughter of Shri DADABHAU RANOJI SALVI.....
of A.T.B. Nagar, Shiv. Bombay. 400022..... of the State of
Maharashtra who now belongs to the Buddhist faith since Birth belonged
before conversion to Buddhism to the HINDU MAHAR. community which
is recognised as Scheduled Caste under the Scheduled Caste and
Scheduled Tribe Lists (Modification) Order 1955 read with the Scheduled
Caste/Scheduled Tribe Order (Amendment) Act, 1956, as adopted for the
Maharashtra State vide Bombay Reorganisation Act, 1960.

Particulars of proof submitted :

1. Application
2. ~~Abstract from Birth Register~~
3. School Leaving Certificate showing ~~his/her~~ ^{her} caste as Bauddh....
4. ~~Father's/Brother's/Sister's Caste Certificate issued by School~~...
Leaving Certificate... showing his caste as Bauddh.....
5. ~~Certificate from Surpanch of Gram Panchayat or Police Patil of~~ ...
6. ~~Abstract of Service Book~~
7. Samaj Certificate
8. Ration Card No. 843.....



Chandras
Principal

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Pandharpur, Dist. Solapur

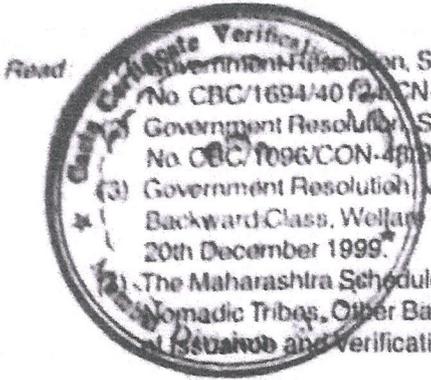
Prapada
Principal

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rsp/271087

CERTIFICATE OF VALIDITY

No. 89303



Read: Government Resolution, Social Welfare, Cultural Affairs, Sports and Tourism Department, No. CBC/1694/40124/CN-256/BCW-5, dated 26th December 1994.
Government Resolution, Social Welfare, Cultural Affairs, Sports and Tourism Department, No. CBC/1096/CON-4/BCW-5, dated 3rd June 1996.
(3) Government Resolution, Vimukta Jati, Nomadic Tribes, Other Backward Classes, Special Backward Class, Welfare Department, No. CBC/1098/14850/CON-118/OBC-5, dated 20th December 1999.
(4) The Maharashtra Scheduled Caste, Scheduled Tribes, De-notified Tribes (Vimukta Jatis), Nomadic Tribes, Other Backward Classes and Special Backward Category (Regulation of Issuance and Verification of) Caste Certificate Act, 2000.

CASTE CERTIFICATE SCRUTINY COMMITTEE MUMBAI DIVISION, MUMBAI, MAHARASHTRA STATE

Committee Decision No. C-Dec/521/132/CVN/ dated 7-9-07
521/07

WHEREAS, an application of Shri/Smt./Kumari hun. pa. ya. Dadabhan.
ay. Salvi dated the 9/3/07 along with the documents was received by the Caste Certificate Scrutiny Committee for verification of Caste Certificate of Scheduled Caste / Vimukta Jati / Nomadic Tribes / Special / Other Backward Class and the same was placed before the said Committee in the meeting held on 7-9-07

AND WHEREAS, in accordance with the powers conferred on it under Government Resolution, Social Welfare, Cultural Affairs and Sports Department, No. CBC/1694/40124/CN-256/BCW-V, dated 26th December 1994 and dated 16th October 1985 read with Corrigendum, dated 28th October 1985, the Committee has, on the basis of the documents produced before it, verified and scrutinised the said Caste Certificate/ claim.

NOW, THEREFORE, THE Committee hereby certifies that caste claim is found to be correct and the Caste Certificate bearing No. Em/Sch/79188 dated the 15/12/88 issued by the Executive Magistrate/Sub-Divisional Officer/Magistrate/Deputy Collector Bombay City District Bombay certifying that Shri/Smt./Kumari hun. pa. ya. Dadabhan. Salvi belongs to Bouddha is found to be **VALID**.

A. Salvi
Chairman
Additional Commissioner
Konkan Division

Mashruwate
Member
Divisional Social Welfare Officer
Mumbai Division

Chorade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Member Secretary
Research Officer
Mumbai Division



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Pandharpur, Dist. Solapur

क्र. सं. व व्यक्ति का नाम	व्यक्ति का पता	क्र. सं. व व्यक्ति का नाम	व्यक्ति का पता
शिव दत्तजीर शेंडे (एक्स-४३०४)	शिव दत्तजीर शेंडे वाडा (पूर्व), मुंबई ४०० ०५१	विश्वकामेश सोमनाथ पोडोकर (एक्स-५३२८)	विश्वक सोमनाथ पोडोकर डोबिवली, ता. कात्याण, जिल्हा ठाणे.
श्रीमती देवप्रभाय शेंडे (एक्स-४३०५)	श्रीमती देवप्रभाय शेंडे कुर्ली (५), मुंबई ४०० ०००	रश्मि लक्ष्मण बेळोडे (एक्स-५३२९)	श्री राजेश्वरी राजेंद्र पवार मणी बी डी डी. बाळ फ. ८, खो. फ. ५४, नाथनाथ बाघर (पूर्व), मुंबई ४०० ०१४.
शिवदास शेंडे (एक्स-४३०८)	शिवदास शेंडे वरुणेश्वरी शेंडे बोरोवली (५), मुंबई ४०० १०३.	सुनिता अशोक जाधव (एक्स-५३३०)	सोहा सुबोध कांबळे अंधेरी, मुंबई ४०० ०६९.
सुधाश्री बापू पवार (एक्स-४३१०)	सुधाश्री बापू सुधिकोरणे झार बी. मुंबई ४०० ०१०.	डु. शिल्पा मंगेश कर्वे (एक्स-५३३१)	सौ शिल्पा मंगेश साधळे साठोव, मुंबई सेंट्रल, मुंबई ४०० ०३४.
शुभाश्री पवार (एक्स-४३११)	शुभाश्री पवार सुधिकोरणे झार बी. मुंबई ४०० ०१०.	बाबुराव खंडप्पा रामवीथ (एक्स-५३३२)	बाबुराव खंडप्पा कोल्स्कर गोवडी, मुंबई ४०० ०४३.
शिवदास शेंडे (एक्स-४३१२)	शिवदास शेंडे स. अ. अ. अ. ता. लुका हवेली, जिल्हा ठाणे ४११ ०५१	डु. सुलभा सुरेंद्र पटेकर (एक्स-५३३३)	सौ. सुलभा माटीन बोर्डे कुर्ली, मुंबई ४०० ०७०.
शिवदास शेंडे (एक्स-४३१३)	शिवदास शेंडे सायन, मुंबई ४०० ०२३.	जयश्री अनंत लाड (एक्स-५३३४)	जयश्री रवि घोणे पनवेल, तालुका पनवेल, जिल्हा रायगड ४१० २०६.
शिवदास शेंडे (एक्स-४३१४)	शिवदास शेंडे काळाचौकी, मुंबई ४०० ०३३.	अश्लीला रहेमत खान (एक्स-५३३५)	अश्लीला सलीम मिर्झा भिवंडी, ता. भिवंडी, जिल्हा ठाणे.
शिवदास शेंडे (एक्स-४३१५)	शिवदास शेंडे काळाचौकी, मुंबई ४०० ०३३.	बिकीस आदम शेख (एक्स-५३३६)	बिकीस हमीद शेख वाटे. ता. भिवंडी, जिल्हा ठाणे.
शिवदास शेंडे (एक्स-४३१६)	श्री. रंजना रमेश साठोव कुर्ली, मुंबई ४०० ०३०.	शाहिदा श. हरतअली शेख (एक्स-५३३७)	शाहिदा अनवरहुसेन मुत्सला वाटे (पूर्व), मुंबई ४०० ०५१.
शिवदास शेंडे (एक्स-४३१७)	अश्विनाश लक्ष्मण ठाकरे डोबिवली (पूर्व), जिल्हा ठाणे.	योगेश शेखर सुखटणकर (एक्स-५३३८)	योगेश चंद्रशेखर सुखटणकर रहितर, मुंबई ४०० ०६८.
शिवदास शेंडे (एक्स-४३१८)	सौ. सुहासिनी ज्ञानेश्वर भवारी कात्याण, जिल्हा ठाणे.	जयश्री शंकर पोवार (एक्स-५३३९)	जयश्री सुदेश मंजळ रत्नागिरी, ता. रत्नागिरी, जिल्हा रत्नागिरी ४१५ ६१२.
शिवदास शेंडे (एक्स-४३१९)	शिवदास शेंडे डोबिवली, तालुका कात्याण, जिल्हा ठाणे ४२१ २०२.	डु. सुनिता प्रभाकर बागवे (एक्स-५३४०)	सौ. सुनिता मिलिंद सावंत मुल्हा, मुंबई ४०० ०८१.
शिवदास शेंडे (एक्स-४३२०)	अश्विन पंढरीनाथ तापडे कुलाबा, मुंबई ४०० ०३९.	गुणप्रिया दादाभ उ. साठोव (एक्स-५३४१)	गुणप्रिया दादाभ उ. साठोव पाटकोपर (पूर्व), मुंबई ४०० ०२२.
शिवदास शेंडे (एक्स-४३२१)	पंढरीनाथ काशिराम तापडे विरोदे, तालुका यावल, जिल्हा जळगाव.	सोनाली भ. लक्ष्मण वांतक (एक्स-५३४२)	सोनाली संप्रभाय वांतक मुल्हा, तालुका बरई, जिल्हा ठाणे ४०१ २०१.
शिवदास शेंडे (एक्स-४३२२)	श्री. मानसी मनोज कारेकर माहिम, मुंबई ४०० ०१६.	दनाडिस धनिता डावगो (एक्स-५३४३)	दनाडिस धनिता डावगो ब. र. (पूर्व), तालुका बरई, जिल्हा ठाणे ४०१ २०१.
शिवदास शेंडे (एक्स-४३२३)	वीणवी विलास बेलवलकर नाथगाव, मुंबई ४०० ०१४.	उमिलबेन कामायास बोहाण. (एक्स-५३४४)	उमिलबेन कामायास बाघर, मुंबई ४०० ०३८.
शिवदास शेंडे (एक्स-४३२४)	श्री. नीला प्रशांत पगारे दादर, मुंबई ४०० ०१४.	डु. अमिता शिबकुमार दाडेकर (एक्स-५३४५)	श्री अमिता शिबकुमार अंधेरी (पूर्व), मुंबई
शिवदास शेंडे (एक्स-४३२५)	श्री. सोनाली वसंत भराडे बोरोवली (५), मुंबई ४०० ०११.	शिवदास शेंडे दादर, मुंबई ४०० ०३८.	शिवदास शेंडे दादर, मुंबई ४०० ०३८.
शिवदास शेंडे (एक्स-४३२६)	कैयम याकूब खान डोंगरी, मुंबई ४०० ००९.	शिवदास शेंडे दादर, मुंबई ४०० ०३८.	शिवदास शेंडे दादर, मुंबई ४०० ०३८.
शिवदास शेंडे (एक्स-४३२७)	प्रकाश चिमणराव गळाडे कामा इस्टेट, बोरोवली (पूर्व), मुंबई ४०० ०६३.	शिवदास शेंडे दादर, मुंबई ४०० ०३८.	शिवदास शेंडे दादर, मुंबई ४०० ०३८.

आव दोन-१६९३



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
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Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Gunpriya Chopade 5 @ gmail . com .

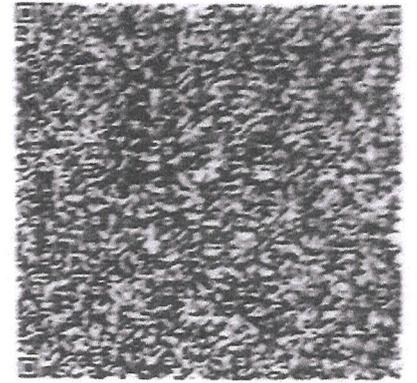
आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
AAKPC0232G



नाम / Name
GUNPRIYA RASHTROUDHAR
CHOPADE
पिता का नाम / Father's Name
DADABHAU RANOJI SALVI

31122018

जन्म की तारीख /
Date of Birth
17/09/1967

Chopade
हस्ताक्षर / Signature



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

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Dr. S. H. Fugare
M.Sc. Ph.D.
Offg. Registrar

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

वणी रोड, म्हासुरुळ, नाशिक - ४२२ ००४

Vani Road, Mhasrul, Nashik - 422 004

Phone: 0253-2539198, 2539190 / EPABX: 0253-2539100 - 300 / Fax: 0253-2539195

E-mail: academic@muhsnashik.com / Web: www.muhsnashik.com

Phone: 2539198

No.MUHS/E-6/613F/ 472

Date 25/10/2007

To,
The Principal,
Jaslok College of Nursing,
Jaslok Hospital & Research Centre,
15 Dr. G. Deshmukh Marg,
Mumbai - 400 026

Sub:- Approval of appointment of Teachers.

Ref:- Your letter No. JH/JCN - 144/2007 dated 18/10/2007

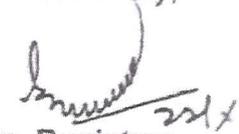
Madam,

With reference to the above-cited subject regarding the proposal for approval to the appointment of teacher of your College, I am directed to inform you that the appointment of the following teacher is hereby approved as indicated below:

Sr. No.	Teachers Name	Post	Status of Approval
1	Mrs. Chopade Gunpriya R.	Tutor / Clinical Instructor	Approved as a Tutor / Clinical Instructor w.e.f. date of joining after interview i.e.17/03/2007

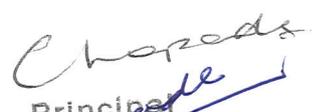
Thanking you.

Yours faithfully,


Offg. Registrar

Note :- Kindly handover the Xerox copy of this letter to approved teacher.




Principal
LifeLine Institute of Nursing
Pandharpur, Dist. Solapur
Principal
LifeLine Institute of Nursing
Pandharpur, Dist. Solapur



Dr. A. N. Suryakar
M.A. D. FACM
Registrar

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

महाराष्ट्र, दिंडोरी रोड, नाशिक-४२२००४
Mhasrul, Dindori Road, Nashik-422 004
Phone: 0253-2539198 / KPABX: 0253-2539100 - 300 / Fax: 0253-2539195
E-mail: academic@muhsnashik.com / Web: www.muhsnashik.com
Phone: 0253-2539198

No. MUHS/EG/6415003/Camp/483)

Date 24/11/2011

To
The Principal
College of Nursing (B.Sc.Nursing)
Dr. Balabhai Nanavati Hospital,
Mumbai - 400 058

Sub. :- Grant of teaching experience under Teachers Approval Campaign.

Sir/Madam,

As you are aware that, University had conducted a special campaign in the affiliated Colleges for collection of data for teacher's approval, as a One-time measure.

Accordingly, on the basis of the information & documents submitted to Approval Campaign Committee by the colleges during the campaign, the committee has recommended to consider the teaching experience of following teachers as shown against their names and the same has been approved by the University on the following conditions.

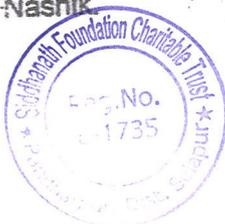
- 1) It may please be noted that these approvals of the below mentioned teachers are accorded for one year only. During this period of one year, you are required to initiate and complete the laid down procedure for selection of teachers, as mentioned in University Direction No. 25/2001 and forward the proposals of selected teachers for approval.
- 2) Seniority in cadre will be considered from the date of regular approval by selection & appointment after duly constituted selection committee as per provisions of Direction No. 25/2001 of Maharashtra University of Health Sciences, Nashik within period of one year.

Sr. No.	Name of teachers	Subject	Approval for the post	Valid Exp. Counted by the Committee			
				Period	Year(s)	Month(s)	Day(s)
1	Ms Gunpriya R. Chopade	Obstetric & Gynecology	Professor cum Principal	From 1994 to 2002 & 2004 to 04/07/11	--	--	--
	Ms D'Souza Jacinthe Lili	Community Health Nursing	Lecturer	From 02/07/01 to 04/07/11	--	06	--
3	Ms George Mariamma	Nursing	Tutor / Clinical Instructor	From Oct 1994 to July 05 & 18/06/10 to 04/07/11	01	--	--
4	Ms Alison Biju	Nursing	Tutor / Clinical Instructor	From 15/04/08 to 04/07/11	--	02	--
5	Ms B. Iris Beulah	Nursing	Tutor / Clinical Instructor	From 01/04/11 to 04/07/11	--	03	--
6	Ms Sawant Apurva Avinash	Nursing	Tutor / Clinical Instructor	From 06/06/11 to 04/07/11	--	01	--
7	Ms Sonia Pokhale	Nursing	Tutor / Clinical Instructor	From 01/04/11 to 04/07/11	--	03	--
8	Ms Kshitija Jagtap	Nursing	Instructor	From 04/07/11 to 04/07/11	--	03	--

Thanking you.

A. N. Suryakar
Registrar

Note : Kindly hand over photo copy to all concerned teachers.
Copy to:- PG Academic Section, MUHS Nashik.



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Scanned by *Chopade*
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

महाराष्ट्र, वणी-दिंदोरी रोड, नाशिक-४२२००४

Mhasrul, Wani-Dindori Road, Nashik-422 004

Phone: 0253-2539198 / EPABX: 0253-2539100 - 300 / Fax: 0253-2539195

E-mail: academic@muhsnashik.com / Web: www.muhsnashik.com

Ph. No. 0253 - 2539198

Prakash R. Patil
Asst. Registrar

No. MUHS/E6/6124003/ 2181

Date: 31/05/2012

To
The Principal
College of Nursing,
Dr. Balabhai Nanavati Hospital,
S. V. Road, Vile-Parle (W),
Mumbai - 400 086

Sub: - Approval to the Appointment of Teachers...

Ref.: - Your letter No. Nil dtd. 05/04/2012.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that Hon'ble Vice - Chancellor is pleased to grant approval to the appointment of following teachers as indicated below: -

Sr. No.	Subject	Teachers Name	Post	Status of Approval
1	Obstetric & Gynaecological Nursing	Ms Gunpriya R. Chopade	Professor cum Principal	w.e.f. the date of joining after interview i.e. 06/04/2012.
2	Medical Surgical Nursing	Ms Pricey Paul Rose	Lecturer	w.e.f. the date of joining after interview i.e. 06/04/2012.
3	Obstetric & Gynaecological Nursing	Ms Anto Udhaya P.	Lecturer	w.e.f. the date of joining after interview i.e. 06/04/2012 for one year, extendable after receipt of MNC Registration Certificate within this period.
4	Nursing	Ms. Jacinthally Roanld D'souza	Tutor / Clinical Instructor	w.e.f. the date of joining after interview i.e. 06/04/2012.
5	Nursing	Ms Kshitija Jagtap	Tutor / Clinical Instructor	w.e.f. the date of joining after interview i.e. 06/04/2012.
6	Nursing	Ms Iris Beulah B.	Tutor / Clinical Instructor	w.e.f. the date of joining after interview i.e. 06/04/2012 for one year, extendable after receipt of MNC Registration Certificate within this period.
7	Nursing	Ms Alison Biju	Tutor / Clinical Instructor	w.e.f. the date of joining after interview i.e. 06/04/2012 for one year only.
8	Nursing	Ms. Sapkal Ashwini Chandrakant	Tutor / Clinical Instructor	w.e.f. the date of joining after interview i.e. 06/04/2012 for one year only.

You are requested to hand over photo copy of this letter to concern teachers.

Yours faithfully,

Asst. Registrar
Academic Section

Copy to: Dy Registrar Academic Section (D-3) MUHS Nashik



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
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Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



डॉ. कवळिदास द. चव्हाण
 एम.बी.बी.एस., एम.डी. (न्यायचिकित्साशास्त्र)
 कुलसचिव

Dr. Kalidas D. Chavan
 M.B.B.S., M.D.(Forensic Medicine)
 Registrar

Out No.: MUHS/ UG/E-6/ 151109/ 14 51 /2018

Date: 27/09/2018

[Temporary approval for the post(s) of Open Category]

To
 The Principal
 ITM-IHS College of Nursing,
 Plot No. 11, Sector No. 12,
 New Parvel (E), Dist. - Raigad - 410 206

Sub. : Temporary Approval to the Appointment of Teacher(s).
 Ref. : 1) University Direction No. 01/2017 dated 13/04/2017
 2) Your Letter No. . ITM-HIS/CON/2018/315 dtd. 09/08/2018

Sir/Madam,

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment of the following teacher(s) has / have been considered by the University and it has been decided to grant the approval, as indicated below :-

Sr. No.	Subject	Name of the Teacher	Designation; Post Category	Status of Approval
1	Obstetrics & Gynaecological Nursing	Ms. Gunpriya Rashtrouhar Chopade (Salvi) (SC)	Associate Professor (Open)	w.e.f. date of joining i.e. 15/03/2018 temporary upto 31/07/2020 subject to following condition.
2	Nursing	Ms. Dakshata Bahadurshingh Rajput (Open)	Clinical Instructor/ Tutor (OBC)	w.e.f. date of joining i.e. 20/07/2018 temporary upto 31/07/2019 against OBC category subject to following condition.
3	Nursing	Ms. Pampana Durga Bhavani Ganapathi (Krishna Bokka) (Open)	Clinical Instructor (Physical Disabilities)	w.e.f. date of joining i.e. 20/07/2018 temporary upto 31/07/2019 against Disability category subject to following condition.

Note:- The above mentioned approvals are given as per the documents submitted by the College. In case, if any documents found incorrect or invalid, the approval given to the concern candidate stands automatically cancelled and responsibilities of that effect rest with the college.

1) The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor may be cancelled.



Chopade (PTO)
 Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Scanned by
 Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

6/2/19

Ref No. SFCT/LEO/42/2026

Date: 12/01/26

Appointment Order

To,

Mrs. Rajamideni Hiremath
Karnataka,
.....

Subject: Appointment on the post ...Nurse...Principal

Sir / Madam,

With reference to your application dated 18/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Nurse...Principal.

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

2) You are appointed in the pay scale of Rs. 80,000/- With starting pay of Rs. 50,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.

3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

13. Prior to this appointment, if you have been serving in any College / Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
14. Your appointment is subject to the approval from Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with our written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, "Deed of contract" in prescribed format.

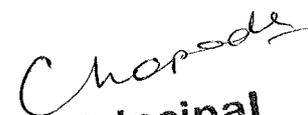
If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give our acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulate period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,



President / Secretary/
Principal / Dean / Director
(any one competent authority to
sign the appointment order)

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA
79 DEC 2025
उपकलेवागार अधिकारी, पंढरपूर

2025

60AB 556102

पंढरपूर विक्री नं. 2400 तारीख 21/10/25

श्री. श्री. शिवाजी बाबा

रा. सोमनाथ

चा मागितलेले रक्कम हा र. 500

चा भारतीय रुपये 500 चे जनरल स्टॅप दिले.

प्रफुल्ल पां. नगरपालिका स्टॅप केंद्र
तहसिल कार्यालयच्या बाहेर, पंढरपूर
परवाना नं. दि. 8/3/1993
कोड नंबर 2400

2/20/2025 05/10

shob

Format of Bond of Service

I, Mr/Mrs... Rajandevsi Hiremath age 60 years,
permanent resident of Somnath do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Nice: Principal
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide
appointment order No. SPCT/LION/42/2026 dated 12/02/2026 in the pay scale /
consolidated pay as 80,000/-

II) That, I was joined / am joining on the said post from Psychiatric Nursing subject to the
approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years
commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave
the service during the said period of two academic years / during the mid- term except in
the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local
Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other
College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services
of the College / Institute under any other circumstances, then I will not be eligible to get the
teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/
physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will
not claim continuity in service / deemed confirmation in the services. In the witness that
what has been stated above I Mr/Mrs. Rajnidexi Hiremath..... am signing

This document on this 12th Day of Feb 2026 At Pandharpur

Date: 12/02/2026

Rajnidexi
Signature

Place: Pandharpur

(Name)

Mrs. Rajnidexi Hiremath

1) Signature of Witness..... [Signature]

Name and Address of Witness Mr. Satesh Ahule

2) Signature of Witness..... [Signature]

Name and Address of Witness Mr. Om Jagumde

Acceptance of the Appointment

Dr _____

From : Mrs. Rajanidevi Hiremath
Karnataka,

(Full resi. Add)

Date : 12/02/2026

To,

Principal
lifeline institute of Nursing,**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/LION/47 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Rajanidevi
Yours faithfully,

(_____)

Appendix - VIJoining Report

Dr _____

From : Mrs. Rajanidevi
Hiremath,

(Full resi. Add)

Date : 12/02/2026

To,

Principal
lifeline institute of Nursing,**Subject : Joining Report****Reference : Your appointment order No. SFCT/LION/47 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Vice - Principal in the subject of Psychiatric w.e.f. (before noon / afternoon).

Allowed to join
Chorode
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Nursing, Rajanidevi
Yours faithfully,

(_____)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)

UNDERTAKING OF TEACHERI, Dr./Vd. Mrs. Rajanidevi HiremathResident of (Permanent home Address) KarnatakaPresently residing at (Present home Address) Karnataka

Do hereby giving an undertaking that -

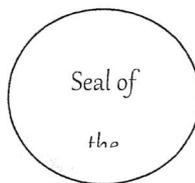
1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Psychiatric Nursing at lifeline institute of Nursing
(Name of the college)

2. My working hours at the College are from 9.00 AM to 5.00 PM
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing Not Practicing
5. If practicing, the place of practice is _____
6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature RajanideviPlace : PandharpurName : Rajanidevi HiremathDesignation : Vice Principal,Date : 12/02/2026

Countersigned by Dean / Principal _____

Place : PandharpurName : Aumpriger chopade,

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

(To be typed on Plain Paper)



Karnataka State Nursing Council

ಕರ್ನಾಟಕ ರಾಜ್ಯ ಶುಶ್ರೂಷಕ ವರಿಷತ್ತು ಬೆಂಗಳೂರು



BENGALURU

Registration No. : 2664

Reg. Date : 23 Sep 1986



SCHEDULE - 1 : FORM 'D', 'E', 'F', 'G', 'H'

Certificate of Registration

[Constituted under the Karnataka Nurses, Mid-Wives and Health Visitors Act 1961]
[Karnataka Act No. 4 of 1962] [Rule 7(3) Part III of the Rules of the Karnataka State Nursing Council]



Name : Ms. RAJANIDEVI HIREMATH

Father / Spouse Name : SHADAKSHARAYA HIREMATH Date of Birth : 01 Oct 1962

Address : SINDAGI ROAD, INDI
VIDYA NAGAR, VIJAYAPUR KARNATAKA - 586209

Qualification : ANM

School / College : A.N.M. TRAINING CENTRE DISTRICT HOSPITAL; VIJAYAPUR

Board / University : DIRECTORATE OF HEALTH AND FAMILY WELFARE SERVICES:
BANGALORE (March-1983)

Additional Qualifications :	Date	Signature
Diploma In Nursing(GNM) (December-1993),DISTRICT HOSPITAL SCHOOL OF NURSING,GULBARGA,KARNATAKA STATE DIPLOMA IN NURSING EXAMINATION BOARD; BANGALORE	26 Oct 1994	
PCBSC Nursing (June-2006),INDIRA GANDHI NATIONAL OPEN UNIVERSITY : NEW DELHI,INDIRA GANDHI NATIONAL OPEN UNIVERSITY; NEW DELHI	09 May 2007	
MSc Nursing PSYCHIATRIC NURSING (May-2010),SAJJALASHREE INSTITUTE OF NURSING SCIENCES; BAGALKOT,RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES; BANGALORE,KARNATAKA	14 Oct 2010	
PhD Nursing (December-2019),HIMALAYAN UNIVERSITY ARUNACHAL PRADESH,HIMALAYAN UNIVERSITY ARUNACHAL PRADESH	26 Jul 2022	



Issue Date : 26/07/2022

I do hereby certify that this is a true copy of the entry of the above specified name in the Nursing Register.



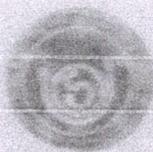
IMPORTANT NOTICE

1. Report change of address and additional qualifications promptly
2. All persons registered under this Act are legally qualified to practice the Nursing.
3. Shall abide by Code of Nursing Ethics framed from time to time.
4. Renewal is compulsory after 3 years of initial registration & every 3 years thereafter, if you are working in Karnataka
5. Scheduled CNE Credit Hours is mandatory for every renewal
6. Do not terminate the certificate.

Chopada
Principal
Lifetime Institute of Nursing
Pandharpur, Dist. Solapur

Chopada
(Mr. PRASANNA KUMAR .O)
Registrar

Chopada
Principal
Lifetime Institute of Nursing
Pandharpur, Dist. Solapur



इन्दिरा गांधी राष्ट्रीय मुक्त विश्वविद्यालय

INDIRA GANDHI NATIONAL OPEN UNIVERSITY

प्रमाणित किया जाता है कि राजनीदेवी हीरेमठ
को नियत अध्ययन-क्रम पूरा कर जून 2006 की परीक्षा
उत्तीर्ण करने के उपरान्त नर्सिंग में विज्ञान स्नातक की
उपाधि द्वितीय श्रेणी में प्रदान की जाती है।

This is to certify that Rajanimidervi Hiremath
having pursued the prescribed course of study and passed
the examination held in June 2006 is hereby awarded
the **Degree of Bachelor of Science (Nursing)**
in Second Division.

Chopeda
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Dr. Tatra

कुल-सचिव
Registrar

नई दिल्ली New Delhi

Mr. Pinar

कुलपति

Vice-Chancellor

Chopeda
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



HIMALAYAN UNIVERSITY



हिमालयन विश्वविद्यालय

(Established Under Section 2F of UGC Act 1956)

डाक्टर ऑफ फिलॉसफी

प्रमाणित किया जाता है कि विश्वविद्यालय और यू.जी.सी. (एम.फिल/पी. एच. डी. उपाधि प्रदान करने हेतु न्यूनतम मानदंड और प्रक्रिया) विनियमन, २००६ के अंतर्गत, वर्ष दिसम्बर 2019 में थीसिस स्वीकृत हो जाने के उपरांत रजनीदेवी हीरेमत को नर्सिंग विषय लेकर फार्मैसी एण्ड पैरा मेडिकल साइंस संकाय में डाक्टर ऑफ फिलॉसफी की उपाधि २०२० के द्वितीय दीक्षांत समारोह में प्रदान की गई।

थीसिस का शीर्षक :

Doctor of Philosophy

This is to certify that having successfully completed the requirements prescribed by University & UGC (Minimum Standards and Procedure for Awards of M.Phil./Ph.D Degree) Regulation, 2009, **Rajanidevi Hiremath**, after approval of his/her thesis in year **December 2019**, has been admitted to the Degree of Doctor of Philosophy in the **Nursing** faculty of **Pharmacy & Para Medical Sciences** in the second convocation held in **2020**.

Title of Thesis : A STUDY TO ASSESS THE KNOWLEDGE OF PRIMARY SCHOOL TEACHERS REGARDING BEHAVIORAL PROBLEMS AND THEIR PREVENTION AMONG SCHOOL GOING CHILDREN'S IN SELECTED GOVERNMENT PRIMARY SCHOOLS AT VIJAYAPURA WITH A VIEW TO DEVELOP AN INFORMATION BOOKLET

कुलसचिव
हिमालयन विश्वविद्यालय
Registrar,
Himalayan University

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

इदं प्रमाणित, अमरावती प्रदेश, दिनांक
Itanagar, Arunachal Pradesh, Dated the (15/01/2020)

कुलपति
हिमालयन विश्वविद्यालय
Chancellor,
Himalayan University

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

ಕೆ.ಸಿ. 014435



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ
ಕರ್ನಾಟಕ



RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
KARNATAKA

ರಜನಿದೇವಿ ಹಿರೇಮತ್

ರವರು, ಸ್ನಾತಕೋತ್ತರ ಪದವಿಗಳ ಯಾಜ್ಞಾ ಯೋಗ್ಯವಾದ ಅವಕಾಶಗಳನ್ನು

ಮೇ ೨೦೧೦ ರ ಪದವಿಪೂರ್ಣ ಪೂರ್ವಸೂಚನೆಯ ವೃತ್ತಿಪರವು

ಮಾಸ್ಟರ್ ಆಫ್ ಸೈನ್ಸ್ ಇನ್ ನರ್ಸಿಂಗ್ (ಸೈಕಿಯಾಟ್ರಿಕ್ ನರ್ಸಿಂಗ್)

ಸ್ನಾತಕೋತ್ತರ ಪದವಿಯನ್ನು ಈಜಿಎಚ್‌ಸಿ, ಕುಮಾರಾಭಿಷೇಕ ಕುಮಾರ್ ಹಾಗೂ ಶೇಖ್ ಮುಖ್ತಾ ಅಬ್ದುಲ್ ಇಸ್ಲಾಮ್ ಇವರುಗಳಿಂದ

ನಾಳು ೩೦ನೇ ಮಾರ್ಚ್ ೨೦೧೧ ರಂದು ನಡೆದ ೧೩ ನೇ ಪದವಿಪೂರ್ಣವಾರ್ಷಿಕ

ವಿಶ್ವವಿದ್ಯಾಲಯದ ಅಧಿಕಾರ ಮುಖೇಯೋಚನ ಪ್ರದಾನ ಮಾಡಿಲ್ಲವೆ

We, the Chancellor, the Pro-Chancellor, the Vice-Chancellor and the members of the Senate and the Syndicate confer

MASTER OF SCIENCE IN NURSING (PSYCHIATRIC NURSING)

on

RAJANIDEVI HIREMATH

in recognition of fulfillment of the requirements for the said

Post Graduate Degree in the examination held during MAY 2010

Given under the seal of the University, in the

13th Convocation held on 30th March 2011



Vice-Chancellor



Bengaluru Date 30/03/2011

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

GOVERNMENT OF KARNATAKA

DIRECTORATE OF MEDICAL EDUCATION

DIPLOMA IN NURSING/MIDWIFERY/PsYCHIATRIC NURSING



Examination Board,
Medical Education, Bangalore-560 002

This is to certify that Smt./Shri RAJANI DEVI HIREMATH has completed
Sop of / Daughter of SHADAKSHARAYA HIREMATH
the Prescribed Diploma Course in General Nursing and Midwifery / Psychiatric Nursing in
theoretical and practical training as prescribed by I. N. C. from 17-12-1990
to 27-12-1993 and has passed the Examination of DECEMBER - 1993
with Register No. 582 at School of Nursing DISTRICT Hospital
GULBARGA

As/She is qualified to undertake the duties of Trained Nurse/Midwife/Psychiatric Nurse.

[Signature]
25/5/94

Sr. Asst. Director (Nursing)
Directorate of Medical Education
Bangalore

Chairman
Board of Examination in General Nursing Midwifery &
Psychiatric Nursing
Director of Medical Education

Chopel
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2300022791

Maharashtra Nursing Council Mumbai

32742



CD-143766

Certificate of Registration

*Reciprocal Registration.
Registration No. XVII- 39196
This is to certify that*

MS. HIREMATH RAJANIDEVI SHADAKSHARAYA

Possessing the qualification of **GENERAL NURSING & MIDWIFERY*

*has been given Reciprocal Registration under the Maharashtra Nurses Act
1966 (Mah.XI of 1966) in part I of the Register for **REST OF MAHARASHTRA** Region in*

*Section XVII for the purpose of employment/education at the **LIFELINE INSTITUTE OF NURSING, SOLAP** as a **PRINCIPAL**
In witness whereof are herewith affixed the seal of the Maharashtra Nursing Council, Mumbai and
the signature of The President and The Registrar subject to the provisions under section 18(A) of the said Act,*

*This Certificate is valid from **20/03/2024** upto **19/03/2025***



Chopada
Principal

**Lifeline Institute of Nursing
Pandharpur, Dist.Solapur**

[Signature]
Registrar

Chopada
Principal
Lifeline Institute of Nursing

President/ Administrator

[Signature]



KARNATAKA Regd. No.- 2664 Dt 1986/09/23 / D.O.B. 1962/10/01

Addition/Alteration/Attestation or any infringement of this instruction, on front side of this certificate will result in the cancellation of this certificate.

Form 10
[Rule 75(2)]

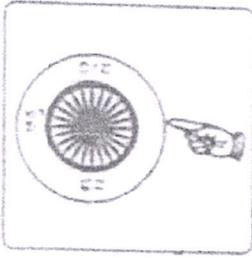
dam

Renewal Slip [Rule 79(2)]

Renewal No.	201703315139		  Registrar
Registration No.	XVII-39196		
Receipt No & Date	1744369157	11/04/2025	
This is to Certify that the Registration of	MISS. RAJANIDEVI SHADAKSHARAYA HIREMATH		
Section XVII for the purpose of employment at the	LIFELINE INSTITUTE OF NURSING PANDHARPUR		
CS C	PRINCIPAL_DEGREE		
is Renewed upto	13/06/2028		
Note: Please attach this slip on the back side of your registration certificate			

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Shri Shivling Vidya Vardhak Education Society (R)

SMT. M. C. VASANTHA COLLEGE OF NURSING

Naubad, Bhalki Road, **BIDAR**. (Karnataka State)
Ph: 08482-232206, 232051, Fax: 08482-232143, Cell : 98440 05135 / 9448467535.
e-mail: smtvasanthacollege@yahoo.co.in

Ref :

Date :

7289/2

10.03.2023

EXPERIENCE AND RELIEVING LETTER

This is to certify that Rajani Devi, was working with our Institution as a Associate Professor from 1st May, 2010 and has been relieved from 10th March, 2023.

She is Sincere, Hard Working and Trustworthy Person. Her Conduct and Character has been found to be good during her tenure at our institution. She will be an asset for any organization/institution She works for.

Date: 10.03.2023

Place: Bidar

G. S. S.
PRINCIPAL
Smt. M.C. Vasantha College of Nursing
Naubad BIDAR

Chopada
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopada
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



HIMALAYAN UNIVERSITY



हिमालयन विश्वविद्यालय

(Established Under Section 2F of UGC Act 1956)

डाक्टर ऑफ फिलॉसफी

प्रमाणित किया जाता है कि विश्वविद्यालय और यू.जी.सी. (एम.फिल / पी. एच. डी. उपाधि प्रदान करने हेतु न्यूनतम मानदंड और प्रक्रिया) विनियमन, २००६ के अंतर्गत, वर्ष **दिसम्बर 2019** में थीसिस स्वीकृत हो जाने के उपरांत **रजनीदेवी हीरेमत** को **नर्सिंग** विषय लेकर **फार्मसी एण्ड पैरा मेडिकल साइंस** संकाय में डाक्टर ऑफ फिलॉसफी की उपाधि **२०२०** के द्वितीय दीक्षांत समारोह में प्रदान की गई।

थीसिस का शीर्षक :

Doctor of Philosophy

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कुलसचिव
हिमालयन विश्वविद्यालय
Registrar,
Himalayan University

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

ईटानगर, अरुणाचल प्रदेश, दिनांक
Itanagar, Arunachal Pradesh, Dated the 15/01/2020

कुलपति
हिमालयन विश्वविद्यालय
Vice-Chancellor,
Himalayan University



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Karnataka State Nursing Council

ಕರ್ನಾಟಕ ರಾಜ್ಯ ಶುಶ್ರೂಷ ಪರಿಷತ್ತು ಬೆಂಗಳೂರು



BENGALURU



Registration No. : 2664

Reg. Date : 23 Sep 1986

SCHEDULE - 1 : FORM 'D', 'E', 'F', 'G', 'H'

Certificate of Registration

[Constituted under the Karnataka Nurses, Mid-Wives and Health Visitors Act 1961]
[Karnataka Act No. 4 of 1962] [Rule 7(3) Part III of the Rules of the Karnataka State Nursing Council]



Name : Ms. RAJANIDEVI HIREMATH

Father / Spouse Name : SHADAKSHARAYA HIREMATH Date of Birth : 01 Oct 1962

Address : SINDAGI ROAD, INDI

VIDYA NAGAR, VIJAYAPUR KARNATAKA - 586209

Qualification : ANM

School / College : A.N.M.TRAINING CENTRE DISTRICT HOSPITAL; VIJAYAPUR

Board / University : DIRECTORATE OF HEALTH AND FAMILY WELFARE SERVICES;
BANGALORE (March-1983)

Additional Qualifications :

Diploma In Nursing(GNM) (December-1993),DISTRICT HOSPITAL
SCHOOL OF NURSING,GULBARGA,KARNATAKA STATE DIPLOMA
IN NURSING EXAMINATION BOARD; BANGALORE

Date 26 Oct 1994

Signature

PCBSC Nursing (June-2006),INDIRA GANDHI NATIONAL OPEN
UNIVERSITY : NEW DELHI,INDIRA GANDHI NATIONAL OPEN
UNIVERSITY; NEW DELHI

Date 09 May 2007

MSc Nursing PSYCHIATRIC NURSING (May-2010),SAJJALASHREE
INSTITUTE OF NURSING SCIENCES; BAGALKOT,RAJIV GANDHI
UNIVERSITY OF HEALTH SCIENCES; BANGALORE,KARNATAKA

Date 14 Oct 2010

PhD Nursing (December-2019),HIMALAYAN UNIVERSITY
ARUNACHAL PRADESH,HIMALAYAN UNIVERSITY ARUNACHAL
PRADESH

Date 26 Jul 2022



Issue Date : 26/07/2022

I do hereby certify that this is a true copy of the entry of the above specified name in the Nursing Register.



IMPORTANT NOTICE

1. Report change of address and additional qualifications promptly.
2. All persons registered under this Act are legally qualified to practice the Nursing.
3. Shall abide by Code of Nursing Ethics framed from time to time.
4. Renewal is compulsory after 3 years of initial registration & every 5 years subsequently if you are working in Karnataka.
5. Scheduled CNE Credit Hours is mandatory for every renewal.
6. Do not laminate the certificate.

(Mr. PRASANNA KUMAR. O)
Registrar

Sl No. 188798

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Karnataka Secondary Education Examination Board



CERTIFICATE

KAJANIDEVI HIREMATH

D/O SHADAKSHAFAYA HIREMATH With date of birth 01/10/62

FIRST OCTOBER SIXTYTWO and Register No.

215252

appeared for the S.S.L.C. Examination of

APR 1979

and PASSED obtaining the following marks.

SUBJECTS	MARKS		MARKS OBTAINED	CLASS OBTAINED	NOTE		
	MAX.	MIN.					
FIRST LANGUAGE: I PAPER KANNADA II PAPER KANNADA	150	58	73	CLASS OBTAINED	NOTE: FIRST CLASS 'B' AND ABOVE SECURE CLASS 'B' AND ABOVE BUT THE PER CENT OF THE MARKS IN EACH SUBJECT EXCEPT IN THE THIRD LANGUAGE OR IN A OR THE MARKS IN THE THIRD LANGUAGE IS A MINIMUM OF 75 MARKS AND NOT LESS THAN ONE THIRD OF THE MARKS IN EACH SUBJECT AND 50% IN THE AGGREGATE.		
SECOND LANGUAGE: ENGLISH	100	35	58				
THIRD LANGUAGE: HINDI	50	18	38				
CORE SUBJECTS: MATHEMATICS	100	35	68				
SCIENCE	100	35	70				
SOCIAL STUDIES	100	35	61				
TOTAL	600		368			FIRST	UJ47

TOTAL (in words)

THREE HUNDRED SIXTYEIGHT ONLY

BANGALORE

[Signature]
Secretary

Date: 28.05.79

Karnataka Secondary Education Examination Board

Certified that the cumulative record book for the candidate is issued to her on 13/6/79

Received by me on 13/6/79

[Signature]
13/6/79
Head - Master

[Signature]
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

EXPERIENCE CUM RELIEVING CERTIFICATE

It is certified that, *Mrs. Rajawadeh Hiremath* had worked on ad-hoc / temporary / regular teacher in fulltime capacity **Lifeline Institute Of Nursing** as a **Tutor**.

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		From	To
01	<i>Tutor Principal</i>	<i>01/06/2023</i>	<i>31/01/2026</i>

During the said period his/her work and conduct was satisfactory. He / She has been relieved / discharged from the service from He / She bear good moral character. We wish him / her all the best for his / her future endeavours.

This certificate is given as per his / her request.

Date: *31/01/2026*

Place: *Pandharpur*

Chopade

Chairman
Siddhanath Foundation

Chopade
Principal

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

RAJANIDEVI S HIREMATH

SHADAKSHARAYYA NAGAYYA
HIREMATH

01/10/1962
Permanent Account Number
ABIPH8965Q


Signature



06072011

Rajanidevi

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

LIFELINE INSTITUTE OF NURSING

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra

Affiliated to: Maharashtra University of Health Science

Mob. 9730402627 E-mail: lifelineinstituteofnursing@gmail.com

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

Ref. No. SFCT/ LFN/ 36/2026

Date: 12/2/26

Appointment Order

To,

.....
Ms. Saraswati S. Nehorkar
Pisegaon, Beed,
.....

Subject: Appointment on the post Asso. Professor

Sir / Madam,

With reference to your application dated 18/1/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Asso. Professor

The Terms and Conditions of your appointment are as follows:

- 1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 60,000/- With starting pay of Rs. 60,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,

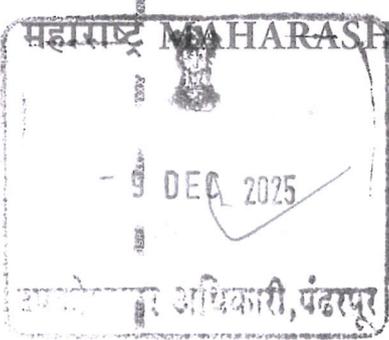
Chopade

President / Secretary /
Principal, Dean or Director
(Any one competent authority to sign the appointment order)

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



पंढरपूर विक्री नं. २५०९ तारीख २५/१२/२६
श्री. _____
रा. _____
चा मागितले वस्तु हा रु. _____
चा भरतीस रुपये _____
चे जनरल स्टॅप दिले.

प्रफुल्ल पां. नगरपाल स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९००९

Format of Bond of Service

I, Mr/Mrs... Saraswati Jalinder Neherkar age 35 years,
permanent resident of A.P. - Pisegaon, Beed. do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Asso. Professor
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide
appointment order No. SFCT/UN/36/2026 dated 12/02/2026 in the pay scale /
consolidated pay as 60,000/-

II) That, I was joined / am joining on the said post from OBG Nursing subject to the
approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years
commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave
the service during the said period of two academic years / during the mid- term except in
the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local
Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other
College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services
of the College / Institute under any other circumstances, then I will not be eligible to get the
teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/
physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will
not claim continuity in service / deemed confirmation in the services. In the witness that
what has been stated above I Mr/Mrs. Saraswati J. Neharkar am signing

This document on this 12..... Day of Feb 2026 At Pandharpur.

Date: 12/02/2026

Saraswati J. Neharkar
Signature

Place: Pandharpur

(Name)

Ms. Saraswati J. Neharkar

1) Signature of Witness..... B.....

Name and Address of Witness..... MS. Tejasini Babam Bhandagar

2) Signature of Witness..... Ahadage.....

Name and Address of Witness..... MS. Lejal Jagrath Ahadage

Acceptance of the Appointment

Dr _____

From : Ms. Saraswati . J.
Neherkar .
Pisegaon , Beed
(Full resi. Add)
Date : 12/02/2026 .

To,

Principal
Lifeline Institute of Nursing

Subject : Acceptance of the Appointment**Reference : Your appointment order No.** SFCT/LION/36/ 2026 **dated** 12/02/2026

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

([Signature])

Appendix - VIJoining Report

Dr _____

From : Ms. Saraswati . J.
Neherkar
Pisegaon , Beed .
(Full resi. Add)
Date : 12/02/2026

To,

Principal
Lifeline Institute of Nursing

Subject : Joining Report**Reference : Your appointment order No.** SFCT/LION/36/ 2026 **dated** 12/02/2026

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of ASSO. in the subject of OBAY w.e.f. (before noon / afternoon). professor.

Allowed to join

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Yours faithfully,

([Signature])

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.
(Please provide Copy to the concerned employee.)

UNDERTAKING OF TEACHERI, Dr./Vd. M. Saraswati. J. Neherikar.Resident of (Permanent home Address) OP - Pisegaon, BeedPresently residing at (Present home Address) OP - Pisegaon, Beed,

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso. Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of OBG. at Lifeline Institute of Nursing
(Name of the college)

2. My working hours at the College are from 9:00 AM to 5:00 PM

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

4. Practicing / not practicing Not practicing

5. If practicing, the place of practice is _____

6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)

Date : 12/02/2026Signature [Signature]Place : PandharpurName : Saraswati. J. Neherikar.Designation : Asso. ProfessorDate : 12/02/2026

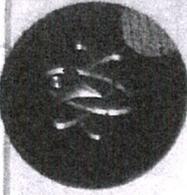
Countersigned by Dean / Principal _____

Place : Pandharpur.Name : Gumprija Chopade
Principal ChopadeLifeline Institute of Nursing
Pandharpur, Dist. Solapur

(To be typed on Plain Paper)



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK



No. 1447813

P. R. No. : 2615182432

Seat No. : 27729
COLLEGE CODE : 6222084

PASSING CERTIFICATE

This is to certify that Shri/Smt.

NEHARKAR SARASWATI JALINDHAR
appeared for and passed the

FINAL M.Sc. (Nursing)

Examination held by the Maharashtra University of Health Sciences, Nashik

in

SUMMER-2016

Nashik

Date :

06 September 2016

Chopeda
Institute of Nursing
Pandharpur, Dist. Solapur

Pandharpur, Dist. Solapur

Chopeda

Controller of Examinations

Record the discrepancy of Name, Year etc., (if any) in above Certificate to the University within Six months of issue of certificate.

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

MAHARASHTRA NURSING COUNCIL
MUMBAI

CERTIFICATE OF REGISTRATION

Registration No. **II-18113**

This is to certify that **Ms. NEHARKAR SARASWATI JALINDAR**

Possessing the qualification of **B. SC. NURSING**

has been duly registered under the Maharashtra Nurses Act, 1966
(Mah. XL of 1966), in Part **V** of the Register for **AURANGABAD**
Region in Section **II** as a registered **NURSE**

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Mumbai, and the signature of the President & Registrar.

Subject to the provisions of the said Act, this certificate is

valid upto **30/03/2017**

Dated the **12th November 2012**.



Chopode
Principal

**Lifeline Institute of Nursing
Pandharpur, Dist. Solapur**

Chopode
Principal

**Lifeline Institute of Nursing
Pandharpur, Dist. Solapur**

[Signature]

Registrar

[Signature]

President

CRP

- 1) Renewal of Registration, Change of Name & Change of Address is the responsibility of the holder of this Certificate
- 2) This Registration Certificate is issued on the basis of previous Registration Certificate of _____ State Nursing Council.
- 3) Addition / Alteration / Attestation or any infringement of this Instruction, on the front side of this Certificate will result in the cancellation of this certificate.

MAHARASHTRA NURSING COUNCIL
MUMBAI

CERTIFICATE OF REGISTRATION

Registration No. **II-18113**

This is to certify that **Ms. NEHARKAR SARASWATI JALINDAR**

Possessing the qualification of **B. SC. NURSING**

has been duly registered under the Maharashtra Nurses Act, 1966
(Mah. XL of 1966), in Part **V** of the Register for **AURANGABAD**
Region in Section **II** as a registered **NURSE**

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Mumbai, and the signature of the President & Registrar.
Subject to the provisions of the said Act, this certificate is

valid upto **30/03/2017**

Dated the **12th November 2012**.



Chopada
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopada
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Registrar

[Signature]
President

-) Renewal of Registration, Change of Name & Change of Address is the responsibility of the holder of this Certificate.
-) This Registration Certificate is issued on the basis of previous Registration Certificate of _____ State Nursing Council.
-) Addition / Alteration / Attestation or any infringement of this Instruction, on the front side of this Certificate will result in the cancellation of this certificate.

158027
MAHARASHTRA NURSING COUNCIL
MUMBAI

CERTIFICATE OF REGISTRATION

Registration No. XVI-14902

This is to certify that Ms. NEHARKAR SARASWATI JALINDAR

Possessing the qualification of B. SC. NURSING

has been duly registered under the Maharashtra Nurses Act, 1966
(Mah. XL of 1966), in Part V of the Register for AURANGABAD
Region in Section XVI as a registered MIDWIFE

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Mumbai, and the signature of the President & Registrar.

Subject to the provisions of the said Act, this certificate is

valid upto 30/03/2017

Dated the 12th November 2012

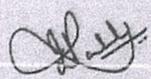


Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Registrar

[Signature]
President

- 1) Renewal of Registration, Change of Name & Change of Address is the responsibility of the holder of this Certificate.
- 2) This Registration Certificate is issued on the basis of previous Registration Certificate of _____ State Nursing Council.
- 3) Addition / Alteration / Attestation or any infringement of this Instruction, on the front side of this Certificate will result in the cancellation of this certificate.

Renewal Slip[Rule 79(2)]		
Renewal No.	20170389649	
Registration No.	II-18113 XVI-14902	
Receipt No & Date	274482	12/02/2022
This is to Certify that the Registration of	Miss. SARASWATI JALINDAR of NEHARKAR	
is Renewed upto	30/03/2027	
		  Registrar
Note: Please attach this slip on the back side of your registration certificate		

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur



2016207718



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महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India
(ISO 9001:2008)

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मास्टर ऑफ सायन्स (ऑब्स्टेट्रिक्स अँड गायनेकोलॉजिकल नर्सिंग)

ही पदवी उन्हाळी-२०१६ मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
नरहे, पुणे येथील एसटीईएमचे सिंगड कॉलेज ऑफ नर्सिंग चे/च्या

नेहरकर सरस्वती जालींदर

यांना

२० डिसेंबर २०१६ च्या दीक्षांत समारंभात प्रदान करित आहोत

We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Master of Science (Obstetrics & Gynaecological Nursing)

on

Neharkar Saraswati Jalindhar

(PRN 2615182432)

of

STES's Sinhgad College of Nursing, Narhe, Pune

for the examination held in Summer-2016
at the Convocation held on 20th December 2016



Pandharsakar
VICE-CHANCELLOR
कुलगुरु

Chopade

**Lifeline Institute of Nursing
Pandharpur, Dist. Solapur**

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK



No. 1447813

P. R. No. : 2615182432

Seat No. : 27729

COLLEGE CODE : 6222084

PASSING CERTIFICATE

This is to certify that Shri/Smt.

NEHARKAR SARASWATI JALINDHAR

appeared for and passed the

FINAL M. SC. (NURSING)

Examination held by the Maharashtra University of Health Sciences, Nashik

in

SUMMER-2016

Date: 06 September 2016

Principal

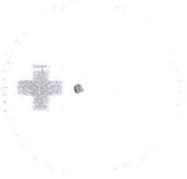
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Nashik

Controller of Examinations

Report the discrepancy of Name, Year etc., (if any) in above Certificate to the University within Six months of issue of certificate.



20800060312

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

(We
the Chancellor, Pro-Chancellor,
Vice-Chancellor
and
Members of the Management Council,
Academic Council
confer the Degree of



Basic Bachelor of Science (Nursing)

on
Neharkar Saraswati Jalindhar
(PRN 0509185207)
of
Akshay College of B.Sc. Nursing, Kaiji, Beed

for the examination held in Summer-2012
at the Convocation
held on 5th October, 2012

P. Chitambar
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

३११ स्त्री,
कुलपती, प्र.कुलपती,
कुलगुरु
आणि

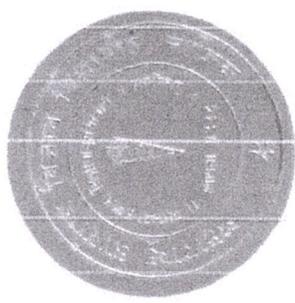
व्यवस्थापन परिषद व
विद्यापरिषदेचे सदस्य

मुलभूत विज्ञान स्नातक (परिचर्या)

ही पदवी उन्हाळी-२०१२ मधील परीक्षेत उत्तीर्ण
झाल्याबद्दल
के.जे. बीड येथील अक्षय कॉलेज ऑफ बी.एस्.सी.
नर्सिंग चे/च्या

नेहरुकर सरस्वती जालिंदर

यांना
०५ ऑक्टोबर, २०१२ च्या
दीक्षांत समारंभात प्रदान करित आहोत



Chopade

VICE-CHANCELLOR / कुलगुरु

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

No: 1103239

P. R. No. 0567185207

Seat No. 96204

COLLEGE CODE: 6410003

PASSING CERTIFICATE

This is to certify that Shri/Smt.

NEHARKAR SARASWATI JALINDHAR

appeared for and passed the

FINAL BASIC B. Sc. (Nursing)

Examination held by the Maharashtra University of Health Sciences, Nashik

in the month of SUMMER-2012

Nashik

Date : 22 August 2012

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Controller of Examinations

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र राज्य माध्यमिक व उच्च माध्यमिक शिक्षण मंडळ, पुणे
Maharashtra State Board Of
Secondary and Higher Secondary Education, Pune
माध्यमिक शालान्त प्रमाणपत्र
SECONDARY SCHOOL CERTIFICATE

असे प्रमाणित करण्यात येते की / This is to certify that

NEHARKAR SARASWATI JALINDAR

आईचे नांव / Mother's Name SHIVGANCA

विभागीय मंडळ Divisional Board	आसन क्रमांक Seat No.	केन्द्र क्रमांक Centre No.	शाळा क्रमांक School No.	प्रमाणपत्राचा अनुक्रमांक Sr. No. of Certificate
AURANGABAD	K079133	2400	57. 07. 005	059228

माध्यमिक शालान्त प्रमाणपत्र परीक्षा

has passed the SECONDARY SCHOOL CERTIFICATE EXAMINATION MARCH-2006

in Grade FIRST

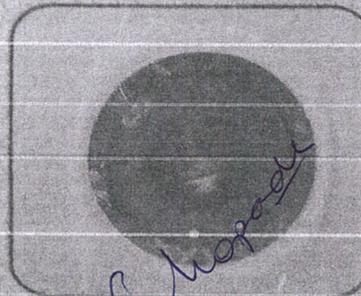
श्रेणीमध्ये खाली दर्शविलेले विषय घेऊन उत्तीर्ण झाला/झाली आहे.
with subjects shown below.

मुख्य विषय Main Subjects	कमाल गुण Max. Marks	प्राप्त गुण Marks Obtained	श्रेणीचे विषय Subjects of Grade	श्रेणी Grade
MARATHI	100	066	[WORK EXP. /TECH.]	
HINDI	100	074	HAND EMBROIDERY	B
ENGLISH	100	050	[SCHOOL SUBJECTS]	
MATHEMATICS	150	103	HEALTH PHYSICAL ED	A
SCIENCE	150	117	SOCIAL SERVICE	B
SOCIAL SCIENCES	150	123	VALUE EDUCATION	B
			GENERAL KNOWLEDGE	A
एकूण गुण/Total Marks	750	533	PERCENTAGE 71.06	
एकूण प्राप्त गुण (अक्षरी)/ Total Marks Obtained (In words)	FIVE HUNDRED AND THIRTY THREE			
जन्म दिनांक / Date of Birth	04/03/1990 FOURTH MARCH NINETEEN NINETY			

F 1673260

33313198933

AURANGABAD
26TH JUNE, 2006



विभागीय सचिव / Divisional Secretary

Principal
Lifeline Institute of Nursing

Principal
Lifeline Institute of Nursing
Niharpur, Dist. Solapur



Shree Saptshrungi Durga Sevabhavi Sanstha Sanchlit

**VAIJNATHRAO MUKUNDRAO DESHMUKH
V.M.D. COLLEGE OF NURSING PARLI-(V).**

23/03/2024



Experience & Reliving Certificate

This is to certify that miss. **Saraswati Jalindar Neharkar** is working in our **V.M.D College Of Nursing, Parli Vaijnath** as a Associate Professor (obstetrics and gynecological nursing) from **01.01.2023** to **22.03.2024** and relived on **23.03.2024**. to the best of my knowledge she bears a good moral character.

Principal

Principal
V.M.D.College of Nursing
Parli-Vaijnath-431515

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Ajantha Building, Bhawani Nagar, PARLI VAIJNATH - 431 515. Dist : Beed. (MS)
Contact :

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Shri. Sai Bahuuddeshiya Sevabhavi Sanstha, Sanchlit.

Late Pramodji Mahajan School of Nursing (RGNM)

Ambajogai Ta. Ambajogai Dist. Beed , Cont : 9423352615

Ref No.

Date 20/09/2014

EXPERIENCE CERTIFICATE

This is to certify that Miss. Neherkar Saraswati Jalinder was working in our Lt. Pramodji Mahajan School Of Nursing RGNM Ambajogai Ta-Ambajogai Dist-Beed as a tutor from 1 Sep 2012 to 20 sep 2014

She is sincere & hardworking & showed interest in various co-curricular activities in our college.

To the best of my knowledge she bears a good moral character.

I wish her all success.

Raoji
Principal

Late Pramodji Mahajan G.N.M. School of Nursing
Ambajogai Dist. Beed

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Reg. No. F-13462 Beed

Shri. Sai Bahuuddeshiya Sevabhavi Sanstha, Sanchlit.

Late Pramodji Mahajan School of Nursing (RGNM)

Ambajogai Ta. Ambajogai Dist. Beed , Cont : 9423352615

Ref No. 902 / 2014

Date 20 / 09 / 2014.

Relieving order

This is to certify that Miss- Neherkar Saraswati Jalinder Was worked in our Late Pramodji Mahajan school of nursing RGNM Ambajogai as a tutor From 01/09/2012 to 20/09/2014.

She is sincere and hardworking and showed interest in various Co-curricular activities in our college. She is relieved on 20/09/2014.

To the best of my knowledge she bears a good moral character.

I wish her all success.

Principal

Late Pramodji Mahajan G.N.M.School of Nursing
Ambajogai Dist. Beed

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Beleshwar Shikshan Prasarak Mandal's

BELESHWAR

INSTITUTE OF BASIC B.Sc. NURSING, PARBHANI

No. : Beleshwar/IOBBN/PBN/3485/2017

Date : 15/07/2017



Experience Cum Relieving Certificate

This is to certify that **MS. SARASWATI JALINDAR NEHARKAR** had worked on temporary teacher in fulltime capacity at Beleshwar Institute of Nursing (Basic B.Sc.) as a Lecturer in Obstetric's & Gynecological Nursing department. She also handled the administrative work in the institute.

Her experience in the said Institute is as under :

Sr. No.	Post	Subject	Experience	
			From	To
1.	Lecturer	Obstetric's & Gynecological Nursing	06.09.2016	15.07.2017

During the said period her work and conduct was satisfactory.

She has been relieved from the service from 15th July 2017.

She bear good Moral character. We wish her all the best for her future endeavors.

This certificate is given as per her request.

Date : 15.07.2017

Place : Parbhani.

Chopade
Principal
Principal

Beleshwar Nagar, Nandkheda Road, Parbhani - 431 401.

Ph. 02452-222280 Fax : 02452-222240

E-mail : beleshwarnursingcollege@gmail.com

Beleshwar Institute of Nursing
Basic B.Sc. Nursing Parbhani
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

MOTHER TERESA NURSING SCHOOL

(B.Sc. Nursing, GNM & ANM)

Sahayoo Educational Campus, Vistnupur, NANDED-431606 (Maharashtra)

Affiliated to Maharashtra University of Health Sciences, Nasik, Maharashtra Nursing Council, Mumbai
Recognized by Indian Nursing Council, New Delhi & Govt. of Maharashtra



2019-20/2302

5-11-2019

EXPERIENCE CUM RELEIVING CERTIFICATE

This to certify that **Miss. Sarswati J. Neharkar** was working as Lecture in our Mother Teresa Nursing College Form 17.07.2017 to 31.10.2019.

She is efficient hardworking, dedicated and she had maintaining good relationship among the staff and co-workers even with management. She is relived from this institute on 31st Oct., 2019.

Her conduct and god during her service period.

We wish her all success.

Principal
Mother Teresa Nursing School
Vistnupur, Nanded

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Guru Govind Singh Memorial School Of Nursing
(B.Sc. Nursing)

Lotus Campus, Dhargarwadi Tq. Dist, Nanded. 431606 M. 9420847110, Email-sggsmson2013@gmail.com

Ref.No. 445MSON/022/0215

Date: 11/11/2022

EXPERIENCE CUM RELIEVING CERTIFICATE

This to certify that **MS.NEHARKAR SARASWATI JALINDAR** had worked on temporary teacher in fulltime capacity at GURU GOVIND SINGH MEMORIAL SCHOOL OF NURSING (B. B.Sc.nursing) NANDED. As a lecturer in Obstetrics and Gynecological Nursing department. She also handled the administrative work in the institute.

Her experience in the said institute as under:

Sr. No.	Post	Subject	Experience	
			From	To
1	Lecturer	Obstetrics and Gynecological Nursing	1 /11/2019	31/07/2021

During the said period her work and conduct was satisfactory. She bear good moral character. We wish her all the best for her future endeavors.

This certificate is given as per her request.

Date ; 31/07/2021

Place Nanded


Principal
PRINCIPAL
GURU GOVINDSINGH
MEMORIAL SCHOOL OF NURSING
NANDED

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Adivasi Shikshan Vikas Prasarak Mandal's
SHIVPRASAD NURSING INSTITUTE

209 A/B Kandhar Phata, Latur Road, Mukhed Dist. Nanded-431715

Mob.9423136071

Website : WWW.Shivprasadmukhed.in
Email:shivprasadnursing@gmail.com

Ref.No. SNIM / Mukhed / office / 2022-23 / 189

Date : 02/11/2022

Experience Cum Relieving Certificate

This is to certify that **Miss. Neharkar Saraswati Jalindar** was working as a **Lecturer (OBGY)** in our **Shivprasad Nursing Institute, Mukhed, Dist. Nanded, State- Maharashtra-431715** From Date **02/08/2021 to 31/10/2022**. She was Sincere & Honest during her service tenure.

She was Relieved from her duties from date 31/10/2022 after office time 05:00pm.

This certificate is issued on her request.



Principal
2/11/2022
Principal

Shivprasad Nursing Inst.
Mukhed Dist Nanded

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

SARASWATI JALINDER NEHERKAR

JALINDER NEHERKAR

04/03/1990
Permanent Account Number
BCQPN6690A

Saraswati
Signature

08102016

Chopade

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

SFCT / LION / 37 / 2026

D: 12/02/2026

Appointment Order

To,
Sajin M Jose.
Kottayam, Kerala.
.....

Subject: Appointment on the post .. Assi... Lecturer.

Sir / Madam,

With reference to your application dated .16/02/2026.in response to our Advt. dated 03.1.01.2026.and subsequent interview held on ...12/02/2026....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of.. Assi... Lecturer.

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

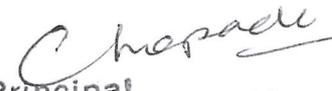
- 2) You are appointed in the pay scale of Rs. 40,000/-. With starting pay of Rs. 40,000/-. Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,



Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

(Any one competent authority to sign the appointment order)



Principal

**Lifeline Institute of Nursing
Pandharpur, Dist. Solapur**

भारतीय गैर न्यायिक

एक सौ रुपये

Rs. 100

रु. 100



सत्यमेव जयते

ONE
HUNDRED RUPEES

भारत INDIA
INDIA NON JUDICIAL

महाराष्ट्र MAHARASHTRA

2025

60AB 556081

9 DEC 2025

पंढरपूर विक्री नं. २५६०

तारीख २२/०२/२५

श्री. _____

रा. _____

चा मागितलेले वस्तु _____

चा भारतीय रुपये _____

चे जनरल स्टॅप दिले.

प्रफुल्ल पा. नारायण स्टॅप व्हेंडर

तहसिल कार्यालयाच्या बाहेर, पंढरपूर

परकाना नं. दि. ४/३/१९९३

कोड नंबर २५०९००९

Format of Bond of Service

I, Mr/Mrs..... Sajin..... Jose..... age ..41 years,
permanent resident of K. HAYAM, Kerala..... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime ..Assis...lecturer..

At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide appointment order No. S.F.C.T./L10N/37/2026 dated 12/02/2026 in the pay scale / consolidated pay as 40,000/-

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs...Sojin. M. Jose..... am signing

This document on this 12th Day of Feb. 2026 At Pandharpur

Date: 12/02/2026

Signature

Place: Pandharpur

Sojin. M. Jose
(Name)

1) Signature of Witness.....[Signature]
Name and Address of Witness.....am yalgunde.....

2) Signature of Witness.....[Signature]
Name and Address of Witness.....Tejastri bundgar.....

Acceptance of the Appointment

Dr _____

From : Sojin. M. Jose
Kottayam, Kerala
(Full resi. Add)Date : 12/02/2026

To,

Principal,Lifeline institute of Nursing,**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/LION/37/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

(Sojin. Jose)

Appendix - VI

Joining Report

Dr _____

From : Sojin. M. Jose
Kottayam.
(Full resi. Add)Date : 12/02/2026

To,

Principal,Lifeline institute of Nursing,**Subject : Joining Report****Reference : Your appointment order No. SFCT/LION/37/2026 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Assis. Lecturer in the subject of MSN. w.e.f. (before noon / afternoon).

Yours faithfully,

(Sojin. Jose)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college
(Please provide Copy to the concerned employee.)

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Sojin. M. Jose.Resident of (Permanent home Address) Kadayam Kerala

Presently residing at (Present home Address) _____

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of MSN. at Lifeline institute of Nursing
(Name of the college)

2. My working hours at the College are from 9:00 Am to 5:00 pm.

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

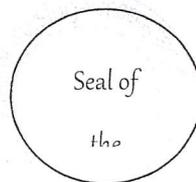
4. Practicing / not practicing not practicing.

5. If practicing, the place of practice is _____

6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes / No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature Sojin.Place : Pandharpur.Name : Sojin. M. Jose.Designation : Asst. Lecturer.Date : 12/02/2026

Countersigned by Dean / Principal _____

Place : Pandharpur.Name : Gunpriya chopude

Chopude
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

(To be typed on Plain Paper)

Chopude
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

8f57f1d94672b8eaa019f7224df0ccb9

ಕ್ರ.ಸಂ. 081960



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ
ಕರ್ನಾಟಕ
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
KARNATAKA

ಸೊಜಿನ್ ಎಂ ಜೋಸ್

ರವರು, ಸ್ನಾತಕೋತ್ತರ ಪದವಿಗೆ ಯಥಾ ಯೋಗ್ಯವಾದ ಅವಶ್ಯಕತೆಗಳನ್ನು

ನವಂಬರ್-2021 ರ ಪರೀಕ್ಷೆಯಲ್ಲಿ ಪೂರೈಸಿರುವರೆಂದು ದೃಢೀಕರಿಸುತ್ತಾ

ಮಾಸ್ಟರ್ ಆಫ್ ಸೈನ್ಸ್ ಇನ್ ನರ್ಸಿಂಗ್ (ಮೆಡಿಕಲ್ ಸರ್ಜಿಕಲ್ ನರ್ಸಿಂಗ್)

ಸ್ನಾತಕೋತ್ತರ ಪದವಿಯಲ್ಲಿ ಕುಲಾಧಿಪತಿ, ಸಮಕುಲಾಧಿಪತಿ, ಕುಲಪತಿ ಹಾಗೂ ಸೆನೆಟ್ ಮತ್ತು ಸಿಂಡಿಕೇಟ್ ಸದಸ್ಯರುಗಳಾದ

ನಾವು 30ನೇ ಏಪ್ರಿಲ್ 2022 ರಂದು ನಡೆದ 24 ನೇ ಘಟಿಕೋತ್ಸವದಲ್ಲಿ

ವಿಶ್ವವಿದ್ಯಾಲಯದ ಅಧಿಕಾರ ಮುದ್ರೆಯೊಡನೆ ಪ್ರದಾನ ಮಾಡಿದ್ದೇವೆ.

*We, the Chancellor, the Pro-Chancellor, the Vice-Chancellor and the
members of the Senate and Syndicate confer*

MASTER OF SCIENCE IN NURSING (MEDICAL SURGICAL NURSING)

on

SOJIN M JOSE

in recognition of fulfilment of the requirements for the said

Post Graduate Degree in the examination held during NOVEMBER-2021

Given under the seal of the University, in the

24th Convocation held on 30th APRIL 2022



Dr. M. K. Ramesh
Vice Chancellor

Bengaluru Date : 15/12/2022

Registration Number: 19NM020

College : JUPITER COLLEGE OF NURSING ,BANGALORE.

P81960
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

0171075



ರಾಜಿವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ
ಕರ್ನಾಟಕ



RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
KARNATAKA
ಸೋಜಿನ್ ಎಮ್ ಜೋಸ್

ಆಗಸ್ಟ್ 2013
ಬ್ಯಾಚುಲರ್ ಆಫ್ ಸೈನ್ಸ್ ಇನ್ ನರ್ಸಿಂಗ್ (ಪೋಸ್ಟ್ ಬೇಸಿಕ್)

೨೬ನೇ ಮಾರ್ಚ್ ೨೦೧೪
೦೬

We, the Chancellor, the Vice-Chancellor, the Vice-Chancellor and the members of the Senate and the Syndicate

BACHELOR OF SCIENCE IN NURSING (POST BASIC)

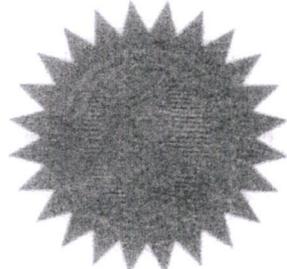
SOJIN M JOSE

in recognition of fulfillment of the requirements for the said Degree in the examination held during AUGUST 2013

16th 26th March 2014



Sojin M Jose



Bangalore Date: 26/03/2014

Reg No 11V8228
College SRI SHARADA COLLEGE OF NURSING BANGALORE

Principal
Lifeline Institute of Nursing
Pandharpur, Dist.Solapur

B No. 446001

GOVERNMENT OF KERALA

SECONDARY SCHOOL LEAVING CERTIFICATE EXAMINATION

GENERAL EDUCATION DEPARTMENT
SECONDARY SCHOOL LEAVING CERTIFICATE

Classed under the Authority of the Government of Kerala

This is to certify that the candidate herein has appeared in the SSLC Examination and has secured the marks as follows

Name of School

ST. THOMAS H S PALA, PALA P O

Admission No. 8149

1. Name : SOJIN M. JOSE

2. Name in Regional Language : *എം. ജി. ജോ*

3. Sex : MALE

4. Date of Birth (in figures) : 25/10/1985

(in words) : TWENTYFIFTH OCTOBER NINETEEN EIGHTY FIVE

5. Religion & Caste : CHRISTIAN, R.C.S

6. Nationality : INDIAN

7. Name of Father/Guardian : JOSE

8. Name of Mother : LILLYKUTTY

9. Home Address : MANGALATHIL, POOVARANY P.O. KOTTAYAM

In Signature of the Candidate

Sojin M. Jose



Register Number 173695
Month & Year March 2001

Subject	Maximum For the paper	Subject Total	Marks in the Public Examination		Subject Group	State Average
			In Figures	In Words		
Group A - Language FIRST LANGUAGE Paper - I Malayalam	50	39				25
Paper - II Malayalam	50	38				31
SECOND LANGUAGE English Paper - I	50	29		ONE SEVEN NINE		13
Paper - II	50	30				13
THIRD LANGUAGE Hindi	50	43				19
GROUP B - Subject Social Sciences						
Paper - I History & Civics	50	37				22
Paper - II	50	39				21
Geography & Economics	50	40				17
SCIENCE Paper - I - Physics	50	44				19
Paper - II - Chemistry	50	44				19
Paper III - Biology & Health Science	50	44				19
MATHEMATICS Paper - I	50	43				18
Paper - II	50	43				15
TOTAL	600	469	FOUR SIX NINE			

Marks: 480 and above First Class with Distinction; 360 to 479 First Class; 300 to 359 Second Class; 210 to 299 Third Class.

PASSED

Chopde

Principal

Lifeline Institute of Nursing
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Name & Signature of the Head of the Institution with Date

Principals

1.6.01

Principals

PRINCIPAL



Secretary
Board for Public Examination, Kerala

CERTIFICATE NO.
KSDNEB/ 39007



KARNATAKA STATE DIPLOMA IN NURSING EXAMINATION BOARD
ಕರ್ನಾಟಕ ರಾಜ್ಯ ಶುಶ್ರೂಷಾ ಡಿಪ್ಲೋಮಾ ಪರೀಕ್ಷಾ ಮಂಡಳಿ
ಬೆಂಗಳೂರು BANGALORE



ವೈದ್ಯಕೀಯ ಶಿಕ್ಷಣ ನಿರ್ದೇಶನಾಲಯ
GOVERNMENT OF KARNATAKA

DIRECTORATE OF MEDICAL EDUCATION

ಪ್ರಮಾಣ ಪತ್ರ

CERTIFICATE



This is to certify that Sri / Smt **SOJIN M. JOSE**

Son / Daughter of **JOSE**

has completed the prescribed Diploma Course in

GENERAL NURSING AND MIDWIFERY / PSYCHIATRIC NURSING

in Theoretical and Practical training as prescribed by Indian Nursing Council

From **17/12/2003** To **13/03/2007** and has Passed the

examination held during **FEBRUARY 2007** with Register No **03DN 16191**

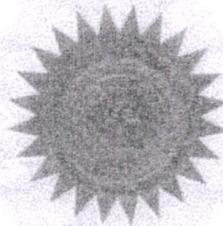
from **RAJIV GANDHI SCHOOL OF NURSING**

BANGALORE.

He/She is qualified to undertake the duties of Trained Nurse/ Midwife/ Psychiatric Nurse

SECRETARY

Karnataka State Diploma in
Nursing Examination Board,
Bangalore-560 002.



Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

DIRECTOR OF MEDICAL EDUCATION
AND CHAIRMAN

Karnataka State Diploma in Nursing
Examination Board, Bangalore

Hijet



Karnataka State Nursing Council

ಕರ್ನಾಟಕ ರಾಜ್ಯ ಶುಶ್ರೂಷ ಪರಿಷತ್ತು ಬೆಂಗಳೂರು



BENGALURU



Registration No. : **85824**

Reg. Date : **24 Aug 2007**

SCHEDULE - 1 : FORM 'D', 'E', 'F', 'G', 'H'

Certificate of Registration

[Constituted under the Karnataka Nurses, Mid-Wives and Health Visitors Act 1961]
[Karnataka Act No. 4 of 1962] [Rule 7(3) Part III of the Rules of the Karnataka State Nursing Council]



Name : **Mr. SOJIN M JOSE**

Father / Spouse Name : **JOSE**

Date of Birth : **25 Oct 1985**

Address : **MANGALATHIL KOCHUKOTTARAM POOVARANY ELIKKULAM
NJANDUPARA
KANJIRAPPALLY , KOTTAYAM KERALA - 686577**

Qualification : **Diploma In Nursing(GNM)**

School / College : **RAJIV GANDHI SCHOOL OF NURSING,BANGALORE**

Board / University : **KARNATAKA STATE DIPLOMA IN NURSING EXAMINATION BOARD;
BANGALORE(February-2007)**

Additional Qualifications :

**PBBSC Nursing (August-2013),SRI SHARADA COLLEGE OF
NURSING; BANGALORE,RAJIV GANDHI UNIVERSITY OF HEALTH
SCIENCES; BANGALORE,KARNATAKA**

Date Signature
11 Jun 2014

**MSc Nursing Medical Surgical Nursing(November-2021),JUPITER
COLLEGE OF NURSING, BANGALORE,RAJIV GANDHI UNIVERSITY
OF HEALTH SCIENCES; BANGALORE,KARNATAKA**

07 Dec 2022



Issue Date : **07/12/2022**

I do hereby certify that this is a true copy of the entry of the above specified name in the Nursing Register.



IMPORTANT NOTICE

1. Report change of address and additional qualifications promptly
2. All persons registered under this Act are legally qualified to practice the Nursing
3. Shall abide by Code of Nursing Ethics framed from time to time.
4. Renewal is compulsory after 3 years of initial registration & every 5 years subsequently
If you are working in Karnataka
5. Scheduled CNE Credit Hours is mandatory for every renewal
6. Do not laminate the certificate.

(Mr. PRASANNA KUMAR .O)

Registrar

Principal

Sl No. **201893**

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

LIFELINE INSTITUTE OF NURSING

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra

Affiliated to: Maharashtra University of Health Science

Mob. 9730402627 E-mail: principal@lifelineinstituteofnursing.edu.in

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

EXPERIENCE CUM RELIVING CERTIFICATE

It is certified that, *Sojin m. Jose* had worked on ad-hoc / temporary / regular teacher in fulltime capacity **Lifeline Institute Of Nursing College Pandharpur** as a **Tutor**

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		Form	To
01	Tutor	1/01/2023	full date

During the said period his / her work and conduct was satisfactory. He / she has been relived / discharged from the service from

He / she bear good moral character. We wish him / her all the best for his / her future endeavours.

This certificate is given as per his / her request.

Date:

Place: Pandharpur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA

SOJIN M JOSE

JOSE

25/10/1985

Permanent Account Number

AVXPJ4183D

Signature



Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Scanned by TapScanner

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

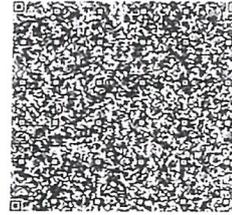
Enrollment No.: 2003/35106/07726

To
Sojin M Jose
C/O: Jose,
Mangalathil House, Paikkad,
Mannackanad P O,
VTC: Kurichithanam,
PO: Mannackanad,
Sub District: Meenachil, District: Kottayam.
State: Kerala,
PIN Code: 686633,
Mobile: 6282122608

26858999



MC268589991FL



आपका आधार क्रमांक / Your Aadhaar No. :

3417 3910 5781

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Issue Date : 07/05/2013



Sojin M Jose
DOB : 25/10/1985
Male

3417 3910 5781

मेरा आधार, मेरी पहचान

Chopra
Principal
Lifetime Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifetime Institute of Nursing
Pandharpur, Dist. Solapur

Ref no. SFC/ (SON) 21/2026

Date: 12/2/26

Appointment Order

To,

.....
Ms. Suhasini S. Hirepatta,
Karnataka,
.....

Subject: Appointment on the post .. Assis. Professor ,

Sir / Madam,

With reference to your application dated 18/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Assi. Professor ,

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. - During the period of your temporary service, your are likely to be discontinued

2) You are appointed in the pay scale of Rs. 40,000/- With starting pay of Rs. 40,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.

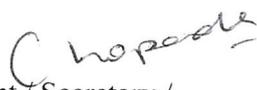
3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,


President / Secretary /
Principal, Dean or Director
(Any one competent authority to sign the appointment order)
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

9 DEC 2025

उत्कृष्टाचार अधिकारी, पंढरपूर

2025

60AB 556100

पंढरपूर विक्री नं. २५०० तारीख २०२०२६

श्री. _____
रा. _____
चा मागितलेपत्र हा रु. _____
चा भरतीस रुपये _____ ये जनरल स्टॅप दिले.

प्रफुल्ल पां. नगरदार स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs. Suhasini S. Hirepatla age 35 years,
permanent resident of Karnataka do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Assistant Professor
At Siddhanath Foundation Charitable Trust, Lifeline Institute of Nursing Pandharpur, vide
appointment order No. SFCT/LION/4/2026 dated 12/02/2026 in the pay scale /
consolidated pay as.....

II) That, I was joined / am joining on the said post from ORAY..... subject to the
approval to my appointment from the University. (Nursing)

III) That, I am agreed to serve continuously for the period of two academic years
commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave
the service during the said period of two academic years / during the mid- term except in
the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local
Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other
College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services
of the College / Institute under any other circumstances, then I will not be eligible to get the
teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/
physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will
not claim continuity in service / deemed confirmation in the services. In the witness that
what has been stated above I Mr/Mrs. Subhasini. S. Hirepatta am signing

This document on this.....12th Day of Feb 2026 At Pandharpur,

Date: 12/02/2026

Signature
Subhasini S. Hirepatta

Place: Pandharpur

(Name)

Ms. Subhasini. S. Hirepatta,

1) Signature of Witness.....B.....
Name and Address of Witness.....Tejaswini. B. Bondagar.

2) Signature of Witness.....Chadga.....
Name and Address of Witness.....Kajal. J. Chadga.....

Acceptance of the Appointment

Dr _____

From : Ms. Sahasini Hirepatte
Karnataka,

(Full resi. Add)

Date : 12/02/2026

To,

PrincipalLifeline Institute of Nursing.**Subject : Acceptance of the Appointment****Reference : Your appointment order No.** SPCT/LION/41/2026 **dated** 12/02/2026

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

Sahasini Hirepatte
(_____)

Appendix - VI

Joining Report

Dr _____

From : Ms. Sahasini Hirepatte,
Karnataka,

(Full resi. Add)

Date : 12/02/2026

To,

PrincipalLifeline Institute of Nursing.**Subject : Joining Report****Reference : Your appointment order No.** SPCT/LION/41/2026 **dated** 12/02/2026

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Assi. Profe. in the subject of OBAY Nursing w.e.f. (before noon / afternoon).

Allowed to join

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Yours faithfully,

Sahasini Hirepatte
(_____)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.
(Please provide Copy to the concerned employee.)

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. ms. Suhāsini Hirepatta,Resident of (Permanent home Address) KarnatakaPresently residing at (Present home Address) Karnataka

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of OBG (Nursing) at Lifeline Institute of Nursing
(Name of the college)

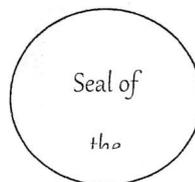
2. My working hours at the College are from 9.00 AM to 5.00 PM

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

4. Practicing / not practicing Not Practicing

5. If practicing, the place of practice is _____

6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes / No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature Suhāsini HirepattaPlace : PandharpurName : Suhāsini HirepattaDesignation : Assi. ProfessorDate : 12/02/2026 Countersigned by Dean / Principal _____Place : PandharpurName : Aumpriya Chopade

(To be typed on Plain Paper)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing

Maharashtra Nursing Council - 2025-26, Mumbai

5th floor, Bombay Mutual Annexe, Gunbow Street, Opp. Residency Hotel,
Off. D. N. Road, Fort, Mumbai, Maharashtra 400001



Date: 09/02/2026

Fees Receipt

Student Name	SUHASINI SOMASHEKARAYYA HIREPATTA DR SUHASINI DR.DEEPAK VASTRAD	Student UID	2300019704
Student Application No	201703263795	Email ID	dr.suhasinihirepatt@gmail.com
Application Name	Other State Renewal		
Application Name	Other State Renewal		
Applicable Fee	3000	Total Fees Paid	3000
Late Fees			
Receipt No	1770632533	Transaction No	E2602090TJXNL3
Transaction Date	2026-02-09	Status	success

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2300019704

33178

Maharashtra Nursing Council Mumbai



Certificate of Registration

Reciprocal Registration.
Registration No. XVII- 39620
This is to certify that



**MRS. VASTRAD DR SUHASINI DR. DEEPAK
NEE MS. HIREPATTA SUHASINI SOMASHEKARAYYA**

CD-143879



**Possessing the qualification of B.SC.NURSING & MIDWIFERY*

*has been given Reciprocal Registration under the Maharashtra Nurses Act
1966 (Mah.XI in part 1 of the Register for REST OF MAHARASHTRA Region in*

*Section XVII for the purpose of employment/education at the SMT KAMALABEN PATEL INSTITUTE OF as a ASSISTANT PROFESSOR
In witness whereof are herewith affixed the seal of the Maharashtra Nursing Council, Mumbai and
the signature of The President and The Registrar subject to the provisions under section 18(A) of the said Act,*

This Certificate is valid from 03/05/2024 upto 02/05/2025



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Registrar

[Signature]
Principal

[Signature]
President/Administrator

KARNATAKA Regd. No.- 76462 Dt 2016/05/19 / D.O.B. 1985/05/16

Addition/Alteration/Attestation or any infringement of this instruction, on front side of this certificate will result in the cancellation of this certificate.

Form 10
(Rule 75(2))

dam

ಕ್ರ.ನಂ. 0216709



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ
ಕರ್ನಾಟಕ
ವಿಶ್ವವಿದ್ಯಾಲಯ



**RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
KARNATAKA**

ಸುಹಾಸಿನಿ ಹಿರೇಪಟ್ಟ

ರವರು, ಪದವಿಗಿಂತ ಮೇಲ್ಮಾನದ ಅಧ್ಯಯನಕ್ಕಾಗಿ
ಏಪ್ರಿಲ್ 2015 ರ ಪರೀಕ್ಷೆಯಲ್ಲಿ ಪೂರೈಸಿರುವುದನ್ನು ಪ್ರತಿಪಾದಿಸುತ್ತಾ
ಬ್ಯಾಚುಲರ್ ಆಫ್ ನೈಸ್ ಇನ್ ನರ್ಸಿಂಗ್ ಬೇಸಿಕ್
ಪದವಿಯನ್ನು ಪೂರೈಸಿ, ಕರ್ನಾಟಕ ರಾಜ್ಯದ, ಕುಲಕರ್ತೃಗಳ ಸಭೆಯು ಮತ್ತು ಸಂಯೋಜಕ ಸಭೆಯು
ಇವು ಒಪ್ಪಿ ಏಪ್ರಿಲ್ 2016 ರಂದು ನಡೆದ 05 ರೇ ಘಟಕದಲ್ಲಿ
ವಿಶ್ವವಿದ್ಯಾಲಯದ ಅಧಿಕಾರ ಪುಸ್ತಕವನ್ನು ಪ್ರದಾನ ಮಾಡಿದ್ದಾರೆ

We, the Chancellor, the Pro-Chancellor, the Vice-Chancellor and the members of the Senate and the Syndicate confer

BACHELOR OF SCIENCE IN NURSING (BASIC)

ON

SUHASINI HIREPATT

*in recognition of fulfillment of the requirements for the said
Degree in the examination held during APRIL 2015*

Given under the seal of the University, in the

18th Convocation held on 05th APRIL 2016

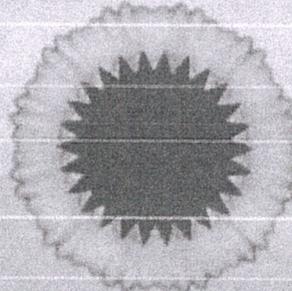


[Signature]
Vice-Chancellor



Bengaluru Date: 05/04/2016

Reg. No: 1523511
College: SMT VASANTHA COLLEGE OF NURSING, BIDAR



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Registration No. : 76462

Reg. Date : 19 May 2016



SCHEDULE - 1 : FORM 'D', 'E', 'F', 'G', 'H'

Certificate of Registration

[Constituted under the Karnataka Nurses, Mid-Wives and Health Visitors Act 1961]
 [Karnataka Act No. 4 of 1962] [Rule 7(3) Part III of the Rules of the Karnataka State Nursing Council]

Name : Ms. SUHASINI HIREPATTA

Father / Spouse Name : SOMASHEKHARAYYA HIREPATTA Date of Birth : 16 May 1985

Address : VIDYA NAGAR,
 INDI, VIJAYAPUR - 586209

Qualification : BSc Nursing

School / College : VASANTHA COLLEGE OF NURSING; BIDAR

Board / University : RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES; BANGALORE,
 KARNATAKA-560041(April-2015)

Additional Qualifications :

MSc Nursing OBG NURSING(September-2020), NOOR COLLEGE OF NURSING; BANGALORE, RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES; BANGALORE, KARNATAKA-560041

Date : 21 Jan 2021
 Signature :

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Chopade
 Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Issue Date : 21/01/2021

I do hereby certify that this is a true copy of the entry of the above specified name in the Nursing Register.



IMPORTANT NOTICE

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3. Shall abide by Code of Nursing Ethics framed from time to time
4. Renewal is compulsory after 3 years of initial registration & every 5 years subsequently if you are working in Karnataka.
5. Scheduled CNE Credit Hours is mandatory for every renewal.



Chopade
 (G. P. Raghu)
 Registrar



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ
ಕರ್ನಾಟಕ



RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES
KARNATAKA

ಸುಹಾಸಿನಿ ಹಿರೇಪಟ್ಟ

ರವರು, ಸ್ನಾತಕೋತ್ತರ ಪದವಿಗೆ ಯಥಾ ಯೋಗ್ಯವಾದ ಅವಶ್ಯಕತೆಗಳನ್ನು

ಸೆಪ್ಟೆಂಬರ್-2020 ರ ಪರೀಕ್ಷೆಯಲ್ಲಿ ಪೂರೈಸಿರುವರೆಂದು ದೃಢೀಕರಿಸುತ್ತಾ

ಮಾಸ್ಟರ್ ಆಫ್ ಸೈನ್ಸ್ ಇನ್ ನರ್ಸಿಂಗ್ (ಅಬ್ಸೆ ಟ್ರಿಕ್ಸ್ ಅಂಡ್ ಗೈನೆಕಾಲಜಿಕಲ್ ನರ್ಸಿಂಗ್)

ಸ್ನಾತಕೋತ್ತರ ಪದವಿಯಲ್ಲಿ ಕುಲಾಧಿಪತಿ, ಸಮಕುಲಾಧಿಪತಿ, ಕುಲಪತಿ ಹಾಗೂ ಸೆನೆಟ್ ಮತ್ತು ಸಿಂಡಿಕೇಟ್ ಸದಸ್ಯರುಗಳಾದ

ನಾವು 7ನೇ ಫೆಬ್ರವರಿ 2021 ರಂದು ನಡೆದ 23 ನೇ ಘಟಿಕೋತ್ಸವದಲ್ಲಿ

ವಿಶ್ವವಿದ್ಯಾಲಯದ ಅಧಿಕಾರ ಮುದ್ರೆಯೊಡನೆ ಪ್ರದಾನ ಮಾಡಿದ್ದೇವೆ.

*We, the Chancellor, the Pro-Chancellor, the Vice-Chancellor and the
members of the Senate and Syndicate confer*

MASTER OF SCIENCE IN NURSING (OBSTETRICS AND GYNAECOLOGICAL NURSING)

on

SUHASINI HIREPATTA

in recognition of fulfilment of the requirements for the said

Post Graduate Degree in the examination held during SEPTEMBER-2020

Given under the seal of the University, in the

23rd Convocation held on 7th FEBRUARY 2021



Dr. M. K. Ramesh

Dr. M. K. Ramesh
Vice Chancellor

Bengaluru Date: 30/08/2022

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Registration Number: 16N0130

College: NOOR COLLEGE OF NURSING, BANGALORE.



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ
Rajiv Gandhi University of Health Sciences
4th 'T' Block, Jayanagar, Bengaluru - 560 041

Provisional Degree Certificate

SUHASINI HIREPATTA

has passed **M.SC.NURSING IN (OBSTETRIC & GYNAECOLOGY
NURSING)**

examination held in **SEPTEMBER-2020**

with Register Number **16NO130**

He / She is eligible for the award of the

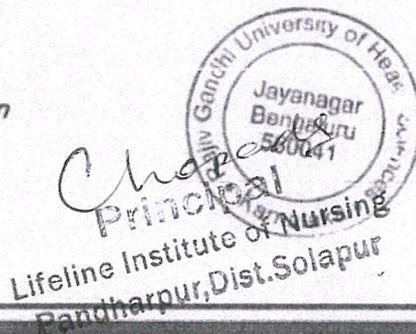
M.SC.NURSING IN (OBSTETRIC & GYNAECOLOGY NURSING) degree.

Valid Upto : Next Convocation

No.: P079985

Date : 09/10/2020

Bangalore



Signature valid

Digitally signed by Mamakrishna Reddy
Date: 2020.10.09 11:41:41 +05:30
Reason: RGUHS
Location: BANGALORE

Registrar (Evaluation)

Chopale
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



ಪದವಿ ಪೂರ್ವ ಶಿಕ್ಷಣ ಇಲಾಖೆ
DEPARTMENT OF PRE-UNIVERSITY EDUCATION

ಪ್ರಮಾಣ ಪತ್ರ, CERTIFICATE

ಈ ಕೆಳಗೆ ನಮೂದಿಸಿದ ಅಭ್ಯರ್ಥಿಯು ಪದವಿ ಪೂರ್ವ ಶಿಕ್ಷಣದ ದ್ವಿತೀಯ ವರ್ಷದ ಪರೀಕ್ಷೆಯಲ್ಲಿ ಕೆಳಗಿನ ವಿವರಗಳೊಂದಿಗೆ ತೇರ್ಗಡೆಯಾಗಿ ಕೋರ್ಸನ್ನು ಸಂಪೂರ್ಣಗೊಳಿಸಿದುದಕ್ಕಾಗಿ ಎಂದು ಪ್ರಮಾಣೀಕರಿಸಲಾಗಿದೆ.

This is to certify that the candidate mentioned below has passed the second year pre-university examination and completed the course with the following details:

ಅಭ್ಯರ್ಥಿ ಹೆಸರು } DEEPAK VASTRAD
Candidate's Name

ಫಲಿತಾಂಶ ದಿನಾಂಕ } 26.05.2002
Date of result

ತಾಯಿಯ ಹೆಸರು } NANDA
Mother's Name

ನೋಂದಣಿ ಸಂಖ್ಯೆ } 301851
Register No.

ತಂದೆಯ ಹೆಸರು } CHANDRASHEKAR
Father's Name

ವಿಷಯಗಳು Subjects ಭಾಗ - I ಭಾಷೆಗಳು Part - I Languages	ನೋಂದಣಿ ಸಂಖ್ಯೆ Register No.	ತಿಂಗಳು/ವರ್ಷ Month/Year	ಗರಿಷ್ಠ Max. Marks	ಪಡೆದ ಅಂಕಗಳು Marks Obtained	
				ಅಂಕಗಳು In figures	ಅಕ್ಷರದಲ್ಲಿ In words
ENGLISH	301851	APR2002	100	70	SEVEN ZERO
SANSKRIT	301851	APR2002	100	57	FIVE SEVEN
ಭಾಗ - II ಆಯ್ಕೆ ವಿಷಯಗಳು Part - II Optionals					
PHYSICS	301851	APR2002	100	45	FOUR FIVE
CHEMISTRY	301851	APR2002	100	55	FIVE FIVE
MATHEMATICS	301851	APR2002	100	36	THREE SIX
BIOLOGY	301851	APR2002	100	59	FIVE NINE
ಕಾಲೇಜು ಸಂಕೇತ ಸಂಖ್ಯೆ College Code No.	EE023	L&A ಅಂಕಗಳು Total Marks	600	322	ಪಡೆದ ವರ್ಗ Class Obtained
ಅಂಕಗಳು ಅಕ್ಷರದಲ್ಲಿ Marks in words					THREE HUNDRED AND TWENTY TWO ONLY
ಕಾಲೇಜು College					SECOND
VB DARBAR PU COLLEGE STATION ROAD, BIJAPUR 586104					

Principal,

782

Bijapur Pre-University
College, Bijapur.



Seal of the College

ಅಭ್ಯರ್ಥಿಯ ಸಹಿ - Signature of the Candidate

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Department of Pre-University Education

ಬೆಂಗಳೂರು Bangalore

013869145
581144210400

ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA

0152347

ಕರ್ನಾಟಕ ಪ್ರೌಢ ಶಿಕ್ಷಣ ಪರೀಕ್ಷಾ ಮಂಡಳಿ
Karnataka Secondary Education Examination Board



ಪ್ರಮಾಣ ಪತ್ರ
Certificate

ಈ ಕೆಳಗೆ ನಮೂದಿಸಿದ ಅಭ್ಯರ್ಥಿಯು ಎಸ್.ಎಸ್. ಎಲ್. ಸಿ. ಪರೀಕ್ಷೆಯಲ್ಲಿ ಕೆಳಗಿನ ವಿವರಗಳೊಂದಿಗೆ ತೇರ್ಗಡೆಯಾಗಿದ್ದಾನೆ/ದ್ದಾಳೆ ಎಂದು ಪ್ರಮಾಣೀಕರಿಸಲಾಗಿದೆ.
This is to certify that the candidate mentioned below has PASSED S.S.L.C. Examination with the following details.

ನೋಂದಣಿ ಸಂಖ್ಯೆ Register No. : 462688	ತಿಂಗಳು/ವರ್ಷ Month/Year : MARCH-2000	ಶಿಕ್ಷಣ ಮಾಧ್ಯಮ Medium of Instruction KANNADA
--	--	--

ಹೆಸರು Name SUHASINI HIREPATTA
ತಂದೆಯ ಹೆಸರು Father's Name SOMASHEKHARAYYA HIREPATTA

ಜನ್ಮ ದಿನಾಂಕ
Date of Birth 16/05/85 SIXTEENTH MAY EIGHTYFIVE

ವಿಷಯಗಳು SUBJECTS	ಅಂಕಗಳು MARKS		ಪಡೆದ ಅಂಕಗಳು MARKS OBTAINED	ಪಡೆದ ದರ್ಜೆ (ಶ್ರೇಣಿ) CLASS OBTAINED
	ಗರಿಷ್ಠ MAX.	ಕನಿಷ್ಠ MIN.		
ಪ್ರಥಮ ಭಾಷೆ/ FIRST LANGUAGE : KANNADA	125	44	115	<ul style="list-style-type: none">* ದ್ವಿತೀಯ ದರ್ಜೆ : 50 ಮತ್ತು ಅದಕ್ಕಿಂತ ಮೇಲ್ಪಟ್ಟು.* ಪ್ರಥಮ ದರ್ಜೆ : 60 ಮತ್ತು ಅದಕ್ಕಿಂತ ಮೇಲ್ಪಟ್ಟು ಮತ್ತು 80ರ ಒಳಗೆ.* ದ್ವಿತೀಯ ದರ್ಜೆ : 50 ಮತ್ತು ಮೇಲ್ಪಟ್ಟು 80ರ ಒಳಗೆ.* ಒಂದು ಬಾರಿ ಪರೀಕ್ಷಿಸಿ ಅರ್ಹತೆಗೆ ಬಂದವರಿಗೇ ಅನ್ವಯಿಸುತ್ತದೆ.ಪಾಠ್ಯಪುಸ್ತಕ ಅಭ್ಯಾಸ.ಈ ವಿಷಯದಲ್ಲಿ ಉತ್ತಮ ಶೇ. 30 ಅಂಕಗಳು ಮತ್ತು ಒಟ್ಟಾರೆ ಶೇ. 35 ಅಂಕಗಳು.* DISTINCTION : 85% AND ABOVE* FIRST CLASS : 60% AND ABOVE BUT BELOW 85%* SECOND CLASS : 50% AND ABOVE BUT BELOW 60%* CLASS IS DECLARED FOR THOSE WHO PASS IN FIRST ATTEMPT ONLY.PASS IN EXAMINATION : 30% MIN. IN EACH SUBJECT AND 35% IN THE AGGREGATE
ದ್ವಿತೀಯ ಭಾಷೆ/ SECOND LANGUAGE : ENGLISH	100	35	069	
ತೃತೀಯ ಭಾಷೆ/ THIRD LANGUAGE : HINDI	100	35	089	
ಗಣಿತ/ MATHEMATICS	100	35	068	
ವಿಜ್ಞಾನ/ SCIENCE	100	35	057	
ಸಮಾಜ ವಿಜ್ಞಾನ/ SOCIAL SCIENCE	100	35	068	
ಒಟ್ಟು ಅಂಕಗಳು/ TOTAL	625	219	466	FIRST (74.56%) 00008

ಪಡೆದ ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) TOTAL (In words)
FOUR HUNDRED AND SIXTY SIX ONLY

ಶಾಲೆಯ ಹೆಸರು ಮತ್ತು ವಿಳಾಸ :
NAME OF THE SCHOOL & ADDRESS :

S S JUNIOR COLLEGE
INDI
BIJAPUR DISTRICT
586209

ದಿನಾಂಕ DATE : 30/05/2000

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

ಕಾರ್ಯದರ್ಶಿಗಳು
ಕರ್ನಾಟಕ ಪ್ರೌಢಶಿಕ್ಷಣ ಮಂಡಳಿ
SECRETARY
KARNATAKA SECONDARY EDUCATION EXAMINATION BOARD
ಬೆಂಗಳೂರು BANGALORE
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



K.T.PATIL COLLEGE OF NURSING

(Affiliated to Maharashtra University of health sciences, Nashik.
Recognized by INC New Delhi, MNC Mumbai & Govt. of Maharashtra.)

Siddharth Nagar, Barshi Road, Osmanabad - 413 501

Ph:02472-224815

www.ktpatilnursing.org

E-mail: ktpatilnursing@gmail.com.

www.aspmedu.org



Ref. No. KTPCON / 5798/a / 2025

Date: 31 / 03 / 2025

EXPERIENCE CUM RELIEVING CERTIFICATE

It is certified that, Dr. Suhasini Hirepatta was working on temporary teacher in fulltime capacity at ASPM's K.T. Patil College of Nursing, Dharashiv as Assistant Professor in Obstetric & Gynecological Nursing Department.

Sr.No	Name of the college	Affiliated to Name of the University	Post and subject	Experience	
				From	To
1.	K T Patil College of Nursing, Dharashiv	MUHS, Nashik	Assistant Professor	03/03/2024	31/03/2025

During the said period her work and conduct was satisfactory.

We have relieved her from all services on 31.03.2025 and We wish her all the best for her future endeavors.

Place: - Dharashiv

Date: 31.03.2025



Principal

Dr.Gajanand R. Wale
Ph.D.(N),MSW,LLB
Principal

K.T. Patil College of Nursing
Dharashiv-413501 (M.s.)

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



R.K.M. SCHOOL OF NURSING, VIJAYAPURA

(Permitted by Govt. of Karnataka, Recognized by Indian Nursing Council, New Delhi & Karnataka State Nursing Council,
Bangaluru & Affiliated to Karnataka State Diploma in Nursing Examination Board, Bangaluru)

Dr. Munir Bangi Hospital Campus, #20 Doulat Koti Road, Near Jamiya Masjid,
Station Road, Vijayapur 586 104, Karnataka

Ph No. : 08352-251256

Website : www.rkmnursingbijapur.org

Email Id : rkmsn437vpura@gmail.com

Ref. No. : RKMSN/Exp Cert/1086/2016-2017

Date : 28/10/2016

EXPERIENCE CERTIFICATE CUM

RELIEVEING LETTER

TO WHOMSOEVER IT MAY CONCERN

This is to certify that *Ms. Suhashini Hirepatta Nursing Tutor* has worked in our R.K.M School of Nursing from 01/06/2015 to 28/10/2016 as a Nursing Tutor. During the course of her employment, she taught the GNM nursing subjects and supervised the students in the clinical and also in rural area. Along with teaching experience. She was a good Administrator and having the basic computer Skills that is in M.S. Office, Excei, and internet etc...

She bears good character. She is hard working and efficient. She takes full

Responsibility in smooth running of our institute.

She was relieved from her duty on 28/10/2016

I wish her all the best for her future career

Place: Vijayapura

Date: 28/10/2016



[Signature]
Principal
Principal
R.K.M. School of
Nursing, Vijayapura

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



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www.aspmedu.org



Ref. No. KTPCON / 5798/a / 2025

Date: 31 / 03 / 2025

EXPERIENCE CUM RELIEVING CERTIFICATE

It is certified that, **Dr. Subasini Hirepatta** was working on temporary teacher in fulltime capacity at ASPM's K.T. Patil College of Nursing, Dharashiv as Assistant Professor in Obstetric & Gynecological Nursing Department.

Sr.No	Name of the college	Affiliated to Name of the University	Post and subject	Experience	
				From	To
1.	K T Patil College of Nursing, Dharashiv	MUHS, Nashik	Assistant Professor	03/03/2024	31/03/2025

During the said period her work and conduct was satisfactory.

We have relieved her from all services on 31.03.2025 and We wish her all the best for her future endeavors.

Place: - Dharashiv

Date: 31.03.2025



Dr. Gajanand R. Wale

Principal

Dr.Gajanand R. Wale
Ph.D.(N),MSW,LLB
Principal
K.T. Patil College of Nursing
Dharashiv-413501 (M.s.)

Chopde
Principal

Lifeline Institute of Nursing
Pandharpur, Dist.Solapur

Chopde
Principal

Lifeline Institute of Nursing
Pandharpur, Dist.Solapur



Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

SFCT/LION/39/2026

Date: 12/12/26

Appointment Order

To
..Poaja..Jamnik.
.....
..Amravati, Maharashtra.
.....

Subject: Appointment on the post ..Assi...Lecturer.

Sir / Madam,

With reference to your application dated 12/10/2026..in response to our Advt. dated 03/10/2026..and subsequent interview held on ..12/10/2026.....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of.....Assi...Lecturer.

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

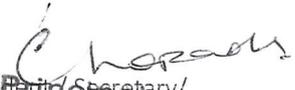
- 2) You are appointed in the pay scale of Rs..35,000/-. With starting pay of Rs...35,000/-. Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

13. Prior to this appointment, if you have been serving in any College / Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
14. Your appointment is subject to the approval from Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with our written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, "Deed of contract" in prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give our acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulate period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period.if will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,


President/Secretary/
Principal/Dean/Director
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
(any one competent authority to
sing the appointment order)


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556099

9 DEC 2025

पंढरपूर अधिकारी, पंढरपूर

पंढरपूर विक्री नं. २५१०० तारीख २२/०१/२०२५

श्री. _____ तारीख २१/०१/२०२५

रा. _____ तारीख २५/०१/२०२५

चा मागितलेयत्न हा रु. १०० चे जागरण स्टॅप दिले.

चा भरतीस रुपये _____

Handwritten signature

Sehat

प्रमुख पां. नगरकार स्टॅप व्हंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परकना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs. Pooja Tamrik age 32 years,
permanent resident of Amravati, Maharashtra do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

I) That, I am appointed temporarily as fulltime ... Assi. Lecturer ...
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide
appointment order No. SFLT/110N/39/2026 dated 12/02/2026 in the pay scale /
consolidated pay as 35,000/-.

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the
approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years
commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave
the service during the said period of two academic years / during the mid- term except in
the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local
Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other
College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services
of the College / Institute under any other circumstances, then I will not be eligible to get the
teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/
physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will
not claim continuity in service / deemed confirmation in the services. In the witness that
what has been stated above I Mr/Mrs. Pooja Tamnik am signing

This document on this 12th Day of Feb. 2026. At Pandharpur.

Pooja

Date: 12/02/2026

Signature

Place: Pandharpur

Pooja Tamnik
(Name)

1) Signature of Witness [Signature]
Name and Address of Witness Om Yalgunde

2) Signature of Witness [Signature]
Name and Address of Witness Rohan Pansande

Acceptance of the Appointment

Dr _____

From: Pooja Jamnik
Amravati,

(Full resi. Add)

Date: 12/02/2026

To,

Principal,
Lifeline Institute of Nursing**Subject : Acceptance of the Appointment****Reference : Your appointment order No.** SFCT/LSON/39/2026 **dated** 12/02/2026

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Pooja
Yours faithfully,

(Pooja Jamnik)

Appendix - VIJoining Report

Dr _____

From: Pooja Jamnik.
Amravati.

(Full resi. Add)

Date: 12/02/2026

To,

Principal
Lifeline Institute**Subject : Joining Report****Reference : Your appointment order No.** SFCT/LSON/39/2026 **dated** 12/02/2026

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Lecturer. in the subject of Community Health Ng w.e.f. (before noon / afternoon).

Pooja
Yours faithfully,

(Pooja Jamnik)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)

Pooja
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHER

I, Dr./Vd. Pooja Tamnik.
 Resident of (Permanent home Address) Amravati, Maharashtra

Presently residing at (Present home Address) _____

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Community health at Lifeline institute of Nursing.
 (Name of the college)

2. My working hours at the College are from 9:00Am to 5:00pm.
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing not practicing.
5. If practicing, the place of practice is _____
6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes / No
 (If yes, attach copy of the letter.)

Date : 12/02/2026

Signature Pooja

Place : Pandharpur

Name : Pooja Tamnik

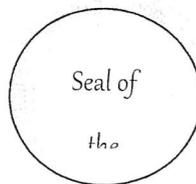
Designation : Asst. Lecturer.

Date : 12/02/2026

Countersigned by Dean / Principal _____

Place : Pandharpur.

Name : Ginpriya chopade



(To be typed on Plain Paper)

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur



Maharashtra Nursing Council Mumbai

0000023495

A.Q.No. 16168

Date:05/10/2023

CERTIFICATE OF ADDITIONAL QUALIFICATION

This is to certify that

MS. POOJA HARISHCHANDRA JAMNIK

of

RATNADIP COLONY ARJUN NAGAR ROAD NEAR JYOTI CREATION AMRAVATI, AMRAVATI,
MAHARASHTRA 444604

bearing Registration No.: II-24036

dated: 27/02/2017

Midwife No.: XVI-20823

dated: 27/02/2017

is trained at

S.T.E.S. SINHGAD COLLEGE OF NURSING, NARHE, PUNE

and have successfully passed the examination of

M. Sc. (Community Health Nursing)

held by

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK, INDIA

in

November 2020

This additional qualification is recorded in the register of Council on

27/09/2023

Receipt No: 540964 19/12/2022



CD-126219



REGISTRAR

MAHARASHTRA NURSING COUNCIL, MUMBAI

Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Maharashtra Nursing Council, Mumbai

Certificate of Registration

Registration No. II - 24036

This is to certify that

Miss. JAMNIK POOJA HARISHCHANDRA

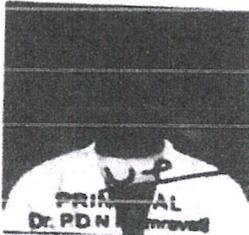
Having passed the examination of B. Sc. Nursing
has been duly registered under the Maharashtra Nurses Act, 1966
(Mah. N. Act of 1966), in part IV of the Register for Nagpur
Region in Section II as a registered NURSE

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Mumbai, and the signature
of the President & Registrar.

Subject to the provisions of the said Act, this certificate is

Valid Upto: 30/03/2022

Dated the : 27th February 2017



[Signature]
Registrar

[Signature]
President

[Signature]
Principal

Lifeline Institute of Nursing
Pandharpur Dist. Solapur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2020207281



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मास्टर ऑफ सायन्स (कम्युनिटी हेल्थ नर्सिंग)

ही पदवी उन्हाळी-२०२० मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
नऱ्हे, पुणे येथील एसटीईएसचे सिंहगड कॉलेज ऑफ नर्सिंग चे/च्या

जामनिक पुजा हरिश्चंद्र

यांना

२९ जानेवारी २०२१ च्या दीक्षांत समारंभात प्रदान करित आहोत

We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Master of Science (Community Health Nursing)

on

Jamnik Pooja Harishchandra

(PRN 2619122815)

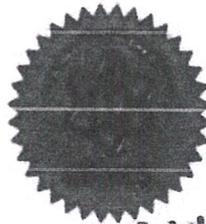
of

STES's Sinhgad College of Nursing, Narhe, Pune

for the examination held in Summer-2020
at the Convocation held on 29th January 2021



20F35902920



(Signature)

VICE-CHANCELLOR
कुलगुरु

(Signature)
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK



P. R. No. : 0512192680

Seat No. : 88263
COLLEGE CODE : 1506003

No. 1448630

PASSING CERTIFICATE

This is to certify that Smt.

JANNIK POOJA HARISHCHANDRA

appeared for and passed the

FINAL BASIC B.S.C. (NURSING)

Examination held by the Maharashtra University of Health Sciences, Nashik

in **SUMMER-2016**

Nashik

Date : **09 September 2016**


Controller of Examinations

Report the discrepancy of Name, Year etc. (if any) in above Certificate to the University within Six months of issue of certificate.

Chopade

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

P. R. No. : 2619122615

Seat No. : 13387

COLLEGE CODE : 6222084

No. 20008093

PASSING CERTIFICATE

This is to certify that Shri/Smt.

JAMNIK POOJA HARISHCHANDRA

appeared for and passed the

FINAL M.Sc. (Nursing) COMMUNITY HEALTH NURSING

Examination held by the Maharashtra University of Health Sciences, Nashik

in SUMMER-2020

Nashik

Date : 25 November 2020

[Signature]
Controller of Examinations

Report the discrepancy of Name Year etc. (if any) in above Certificate to the University within Six months of issue of certificate

[Signature]
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



2016204633



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India
(ISO 9001:2008)

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मुलभूत विज्ञान स्नातक (परिचर्या)

ही पदवी उन्हाळी-२०१६ मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
अमरावती येथील डॉ. पंजाबराव देशमुख नर्सिंग इन्स्टिट्यूट चे/च्या

जामनीक पुजा हरिश्चंद्र

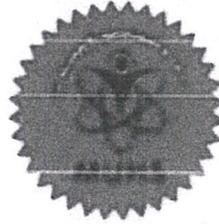
यांना

२० डिसेंबर २०१६ च्या दीक्षांत समारंभात प्रदान करित आहोत

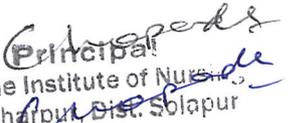
**We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Basic Bachelor of Science (Nursing)**

on
Jamnik Pooja Harishchandra
(PRN 0512192680)
of
Dr.Panjabrao Deshmukh Nursing Institute, Amravati

for the examination held in Summer-2016
at the Convocation held on 20th December 2016




VICE-CHANCELLOR
कुलगुरु

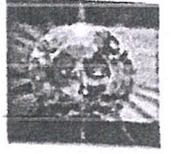

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Committed to developing "Conscientious, Confident & Caring quality nursing professionals"
MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S

Smt. Bakul Tambat Institute of Nursing Education

(Affiliated to MSBNPE, MNC, MUHS & INC, NAAC Accredited)

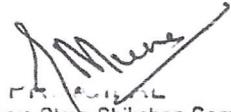


Ref.No.657A/INE/2024

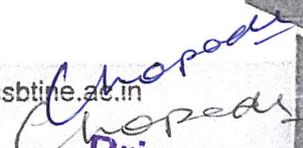
Date: - 01/06/2024

Experience Certificate

This is to certify that Ms. Pooja Jamnik was working with us from 1st April 2022 to 31st May 2024 as 'Clinical Instructor'. During this period her character and conduct was good.


Principal
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

Karvenagar, Pune - 411 052. ☎ (020) 25475020, 25477557 Website : www.mksssbtine.ac.in
E-mail : btine03@gmail.com / btine@maharshikarve.org


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



D. E. SOCIETY'S

Smt. Subhadra K. Jindal College of Nursing

Fergusson College Campus, Shivajinagar Pune - 411 004

● Ph.: (020) 67656480 / 81 / 70 / 68 ● Fax : 67656478 / 67656120

● Email : office.skjcn@despune.org

● Website : www.desnursingcollege.edu.in

Approved by Govt. of Maharashtra, Indian Nursing Council & Maharashtra Nursing Council
and Affiliated to Maharashtra University of Health Sciences, Nashik

Ref.No.: 431/2022/23

Date: 10/10/2022

Relieving Order

This is to certify that Ms Pooja Harishchandra Jamnik was employed as Clinical Instructor w.e.f. 01/03/2021 to 10/02/2022 at D.E. Society's Smt. Subhadra K. Jindal College of Nursing, Pune.

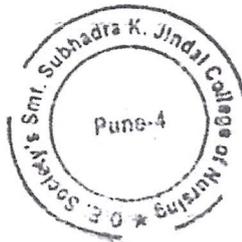
On her request, she was relieved from her duties on 10/02/2022 after office hours.

(Mrs. Rosamma Basil)

Principal,

D.E. Society's

Smt. Subhadra K. Jindal College of Nursing, Pune



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



D. E. SOCIETY'S

Smt. Subhadra K. Jindal College of Nursing

Fergusson College Campus, Shivajinagar Pune - 411 004

• Ph.: (020) 67656480 / 81 / 70 / 68 • Fax : 67656478 / 67656120

• Email : office.skjcn@despune.org

• Website : www.desnursingcollege.edu.in

Approved by Govt. of Maharashtra, Indian Nursing Council & Maharashtra Nursing Council
and Affiliated to Maharashtra University of Health Sciences, Nashik

Ref.No.: 430/2022-23

Date: 10/10/2022

Experience Certificate

This is to certify that Ms. Pooja Harishchandra Jamnik, has been employed as Clinical Instructor/ Tutor at D.E. Society's Smt. Subhadra K. Jindal College of Nursing, Pune w.e.f 01/03/2021 to 10/02/2022. (she has availed a total of 75 days leave without pay)

Mrs. Rosamma Basil

Principal

DES Smt. Subhadra K Jindal College of Nursing, Pune



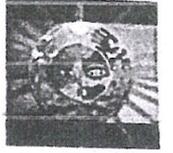
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Committed to developing "Conscientious, Confident & Caring quality nursing professionals"
MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S

Smt. Bakul Tambat Institute of Nursing Education

(Affiliated to MSBNPE, MNC, MUHS & INC, NAAC Accredited)



Ref.No. 66-A/INE/2024

Date: - 01/06/2024

Relieving Order

This is to certify that Ms. Pooja Jamnik was working with us from 1st April 2022 to 31st May 2024 as 'Clinical Instructor'.

She has been relieved from the service w. e. f. 31.05.2024 after duty hours.

PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

Karvenagar, Pune - 411052. ☎ (020) 25475020, 25477557 Website: www.mkssstbine.ac.in

Email: btine03@gmail.com / btine@maharshikarve.org

Principal

Smt. Bakul Tambat Institute of Nursing
Education
Pandharpur, Dist. Solapur
Pandharpur, Dist. Solapur

Parwatabai Pundlikrao Tale Education Society, Mudholkar Peth, Amravati.
Public Charitable Trust - Reg. No. MH 422/2008/Dt. 19/07/2008

FLORENCE NIGHTINGALE NURSING SCHOOL

"Quality care through excellent Nursing Education"

(Affiliated to Maharashtra Nursing Council, Mumbai and Indian Nursing Council, New Delhi.)

Cell - 9011030855, 9011030860 ☎ (0721) 2591175.

Ref. No. FNMS/749/2018

Date : 31/8/18

EXPERIENCE CERTIFICATE

THIS IS TO CERTIFY THAT MISS POOJA

HARISHCHANDRA JAMNIK HAS WORKED IN OUR

INSTITUTION FROM 1/04/2017 TO 31/08/2018 AS A

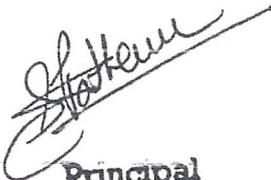
TUTOR.

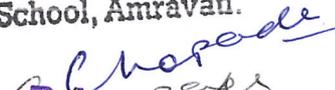
SHE IS VERY GOOD AT TEACHING AND AT HER

WORK.

WE WISH HER BEST LUCK FOR HER FUTURE

CARRIER.


Principal
Florence Nightingale
Nursing School, Amravati.


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



D. E. SOCIETY'S

Smt. Subhadra K. Jindal College of Nursing

Fergusson College Campus, Shivajinagar Pune - 411 004

• Ph.: (020) 67656480 / 81 / 70 / 68 • Fax : 67656478 / 67656120

• Email : office.skjcn@despune.org

• Website : www.desnursingcollege.edu.in

Approved by Govt. of Maharashtra, Indian Nursing Council & Maharashtra Nursing Council
and Affiliated to Maharashtra University of Health Sciences, Nashik

Ref.No.: 431/2022/23

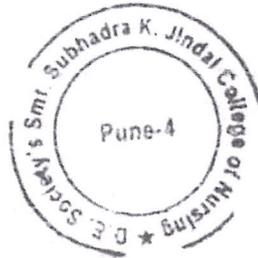
Date: 10/10/2022

Relieving Order

This is to certify that Ms Pooja Harishchandra Jamnik was employed as Clinical Instructor w.e.f. 01/03/2021 to 10/02/2022 at D.E. Society's Smt. Subhadra K. Jindal College of Nursing, Pune.

On her request, she was relieved from her duties on 10/02/2022 after office hours.

(Mrs. Basamma Basil)



Principal,

D.E. Society's

Smt. Subhadra K. Jindal College of Nursing, Pune

Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग

INCOME TAX DEPARTMENT

POOJA JAMNIK

HARISHCHANDRA JAMNIK

09/05/1994

Permanent Account Number

BFFPJ1480Q

P. Jamnik

Signature



भारत सरकार

GOVT. OF INDIA



10082016

Chopada
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



भारत सरकार
Government of India



आधार



पूजा जामनिक
Pooja Jamnik
जन्म तिथि/DOB: 09/05/1994
महिला/ FEMALE

7588 5176 0264

VID : 9131 1557 7127 5360

मेरा आधार, मेरी पहचान

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

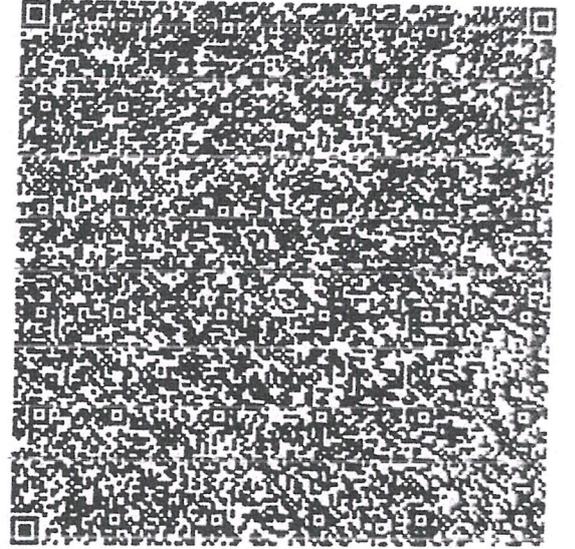


भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



प.स.प.
D/O: हरिशचंद्र जामनिक, शेगाव नका, रत्नदीप कॉलोनी,
अमरावती, अमरावती,
महाराष्ट्र - 444601



Address:
D/O: Harishchandra Jamnik, shegaov naka,
ratnadip colony, Amravati, Amravati,
Maharashtra - 444601

7588 5176 0264

VID : 9131 1557 7127 5360

☎ 1947

✉ help@uidai.gov.in

🌐 www.uidai.gov.in

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur.

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

Ref-No. / SFCT / LIGN / 38 / 2026

Date: 12/2/2026

Appointment Order

To,

Mrs. Kanita M. Pandey.
Ahemari, Pune.

Subject: Appointment on the post ..Ass.: lecturer

Sir / Madam,

With reference to your application dated 17/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026.....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Ass.: lecturer..

The Terms and Conditions of your appointment are as follows:

- 1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 35,000/- With starting pay of Rs. 35,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,

Chopade

President / Secretary /

Principal, Dean or Director

(Any one competent authority to sign the appointment order)

Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

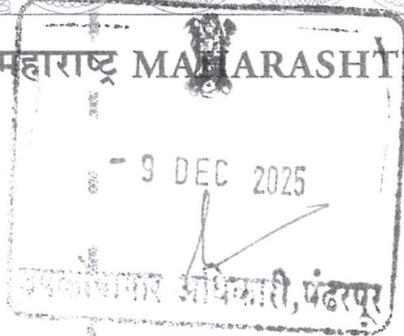
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556098



पंढरपूर विक्री नं. २५०० तारीख २२/०६

श्री. _____

रा. _____

चा मागितलेवहन हा रु. _____

चा भारतीय रुपये _____ चे जनरल स्टॅप दिले.



सब वार
२१
काट

प्रफुल्ल पां. अमरनाथ स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs.....kanita..Mukesh..Pomdey..... age 33 years,
permanent resident of ..A.P. Phansari, Pune..... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Assistant lecturer.
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide appointment order No. SFCT/LION/38/2026 dated 12/02/2026 in the pay scale / consolidated pay as 3510001/-

II) That, I was joined / am joining on the said post from child health Nursing subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs. Kanita. M. Pandey am signing

This document on this 12th Day of Feb 2026 At Pandharpur.

Date: 12/02/2026

Signature

K. Pandey

Place: Pandharpur

(Name)

Mrs. Kanita. M. Pandey

1) Signature of Witness..... B

Name and Address of Witness..... Mrs. Tejashri. B. Bondagar

2) Signature of Witness..... S

Name and Address of Witness..... Mrs. Sumita Bagal

S F C T | L I O N | 23 | 2026

D :- 12/02/2026

Appointment Order

To,

Jyoti. L. Gaikwad
Solapur

Subject: Appointment on the post Tutor

Sir / Madam,

With reference to your application dated 15/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Tutor

The Terms and Conditions of your appointment are as follows:

- 1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 20,000/- With starting pay of Rs. 20,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

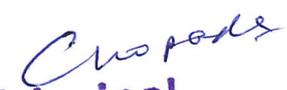
- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,


Principal
President / Secretary /
Principal, Dean or Director
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
(Any one competent authority to sign the appointment order)


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

भारतीय गैर न्यायिक

एक सौ रुपये

Rs. 100

रु. 100



सत्यमेव जयते

ONE
HUNDRED RUPEES

भारत INDIA
INDIA NON JUDICIAL

महाराष्ट्र MAHARASHTRA

2025

60AB 556086



पंढरपूर विक्री नं. 24000 तारीख 21/12/2024

श्री. _____

रा. _____

चा मागितलेले रकम हा रु. _____

चा भारतीय रुपये _____ जे जमरल स्टॅप दिले.

प्रफुल्ल यां. नगरपाला स्टॅप व्हेंडर

तहसिल कार्यालयाच्या बाहेर, पंढरपूर

परतना नं. दि. 8/3/1993

कोड नंबर 2409009

Format of Bond of Service

I, Mr/Mrs..... Jyoti Laxman Gaikwad..... age 28 years,
permanent resident of Solapur North..... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltimeTutor.....
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide
appointment order No. S.F.C.T./MON/23/2026 dated 12.10.2026... in the pay scale /
consolidated pay as. 20,000/-.....

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the
approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years
commencing from 12.10.2026 to 12/02/2028 and hereby undertake that I Will not leave
the service during the said period of two academic years / during the mid- term except in
the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local
Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other
College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services
of the College / Institute under any other circumstances, then I will not be eligible to get the
teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/
physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will
not claim continuity in service / deemed confirmation in the services. In the witness that
what has been stated above I Mr/Mrs.Jyoti L. Gaikwad..... am signing

This document on this...12th..... Day of Feb 2026. At...Pandharpur

Date: 12/02/2026

Jyoti
Signature

Place: Pandharpur

Jyoti Gaikwad
(Name)

1) Signature of Witness.....[Signature].....
Name and Address of Witness.....Am. S. Yalgunde.....

2) Signature of Witness.....[Signature].....
Name and Address of Witness.....Satesh D. Ghule.....

Acceptance of the Appointment

Dr _____

From : Jyoti. L. Gaikwad.
North, Solapur, Solapur
(Full resi. Add)
Date : 12/02/2026

To,

Principal
Lifeline Institute of Nursing

Subject : Acceptance of the Appointment**Reference : Your appointment order No. SFCT/LION/23/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on SFCT/LION/23/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Jyoti...
Yours faithfully,

(Jyoti. Gaikwad)

Appendix - VIJoining Report

Dr _____

From : Jyoti. L. Gaikwad
North Solapur, Solapur
(Full resi. Add)
Date : 12/02/2026

To,

Principal,
Lifeline Institute of Nursing

Subject : Joining Report**Reference : Your appointment order No. SFCT/LION/23/2026 dated 12/02/26**

Sir/Madam,

I have receive the above cited appointment order on SFCT/LION/23/2026 I am accepting the same and joining to the post of Tutor in the subject of Nursing w.e.f. (before noon / afternoon).

Allowed to join

Chopade
Principal 12/2/26
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Yours faithfully,
Jyoti...
(Jyoti Gaikwad)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.
(Please provide Copy to the concerned employee.)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Ms. Jyoti. L. Gaikwad.Resident of (Permanent home Address) North Solapur, Solapur.Presently residing at (Present home Address) North Solapur, Solapur

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Nursing at Lifeline institute of Nursing
(Name of the college)

2. My working hours at the College are from 9.00 AM to 5.00 AM
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing Not Practicing
5. If practicing, the place of practice is _____
6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)Date : 12/02/2026

Signature _____

Place : Pandharpur.Name : Jyoti, L. Gaikwad,Designation : TutorDate : 12/02/2026

Countersigned by Dean / Principal _____

Place : Pandharpur.Name : Gumpriya chopade.

(To be typed on Plain Paper)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur Dist Solapur



महाराष्ट्र राज्य माध्यमिक व उच्च माध्यमिक शिक्षण मंडळ, पुणे

Maharashtra State Board of

Secondary and Higher Secondary Education, Pune

माध्यमिक शालान्त प्रमाणपत्र (पुनर्रचित-2014 पासून)

SECONDARY SCHOOL CERTIFICATE (REVISED FROM-2014)

असे प्रमाणित करण्यात येते की / This is to certify that

Gaikwad Jyoti Laxman

आईचे नांव / Mother's Name **Pushpa**

विभागीय मंडळ Divisional Board	आसन क्रमांक Seat No.	केन्द्र क्रमांक Centre No.	शाला क्रमांक School No.	प्रमाणपत्राचा अनुक्रमांक Sr. No. of Certificate
PUNE	G208095	3021	24.09.018	217275

माध्यमिक शालान्त प्रमाणपत्र परीक्षा

has passed the SECONDARY SCHOOL CERTIFICATE EXAMINATION MARCH-2014

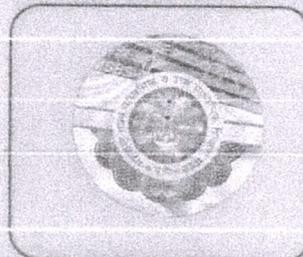
श्रेणीमध्ये खाली दर्शविलेले विषय घेऊन उत्तीर्ण झाला/झाली आहे.

in Grade **SECOND** with subjects shown below.

मुख्य विषय Main Subjects	कमाल गुण Max. Marks	प्राप्त गुण Marks Obtained	श्रेणीचे विषय Subjects of Grade	श्रेणी Grade
MARATHI (1ST LANG)	100	082	(WORK EDN./PRE-VOC.)	
HINDI (2/3 LANG)	100	054	BAKERY PRODUCTS	A
ENGLISH (2/3 LANG)	100	063	(SCHOOL SUBJECTS)	
MATHEMATICS	100	045	HEALTH & PHYSICAL EDUCATION	B
SCIENCE & TECHNOLOGY	100	047	VOCATIONAL GUIDANCE	A
SOCIAL SCIENCES	100	040	PERSONALITY DEVELOPMENT	A
			INFORMATION COMMUNICATION TEC	A
एकूण गुण/Total Marks	500	291	PERCENTAGE \approx 58.20	
एकूण प्राप्त गुण (अक्षरी)/ Total Marks Obtained (In Words)	TWO HUNDRED AND NINETYONE			
जन्म दिनांक / Date of Birth	28/11/1998 (TWENTY EIGHTH NOVEMBER NINETEEN NINETY EIGHT)			

CS141217275

PUNE
17TH JUNE 2014



38 24 9790 7509

Jayant

विभागीय सचिव / Divisional Secretary

Principal

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

278



D. V. Patil Education Society
Deemed to be University Kolhapur

(Declared u/s 3 of the UGC Act 1956 by GOI)

2021000277



WE the Chancellor, Vice - Chancellor and
Members of the Board of Management,
on the recommendation of the Academic Council,
certify that

Gaikwad Jyoti Laxman

has passed the

Bachelor of Science

(Nursing-Post Basic)

Examination in First Class held in June 2023

The said Degree has been conferred upon her

at the convocation held on 22nd day of the month of

March in the Year Two Thousand Twenty Four



*In Testimony whereof are set the Seal of the University
and the Signatures of the Registrar and the
Vice - Chancellor*

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Registrar
Registrar



Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Vice Chancellor

D. Y. PATIL EDUCATION SOCIETY, KOLHAPUR

(Institution Deemed to be University)

Reaccredited by NAAC with 'A' Grade

MAHARASHTRA STATE (INDIA)

0004916

PASSING CERTIFICATE

This is to certify that

Ms. GAIKWAD JYOTI LAXMAN

appeared for and passed in FIRST CLASS in the

BACHELOR OF SCIENCE (NURSING-POST BASIC)

Examination held by the D. Y. Patil Education Society

(Deemed University), Kolhapur in the month of JUNE 2023

P. R. NO. 2021000277

Seat No. : 3356

Date: 6/07/2023

Controller Of Examinations

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

परिशिष्ट "ब"

Form of Certificate to be produced by a candidate belonging to a schedule Caste/Tribe in support of his claim

Documents Verified :

- 1) School leaving Certificate of Applicant issued by Head Master of Modern High School Solapur vide R. No. 10951 Dt. 26/06/2014
- 2) School leaving Certificate of Grand Father issued by Head Master of Z P Prathmik Shala Hattur S Solapur vide R. No. 82 Dt. 16/08/2011
- 3) Birth Certificate / Caste Certificate / S.L.C. of Father issued by Mem Sec Rec CVC Solapur NO 130 Dt. 17/12/2011
- 4) Local Enquiry Certificate of Talathi Dt.
- 5) Local Enquiry Certificate of Gramsevak & Sarpanch Dt.
- 6) Affidavate executed by applicant Dated 23/07/2014
- 7) Local inquiry report by circle Officer No Date

CASTE CERTIFICATE

This is to certify **Kumari. Gaikwad Jyoti Laxman**
Son/Daughter of **Shri. Gaikwad Laxman Yadav**
of Village/Town **Hattur S Solapur** in District/Division **Solapur**
the state/Union **Maharashtra**
belongs to the **MAHAR (SC-37)** Caste/Tribe * which is recognised
as Scheduled Caste/Scheduled Tribe * under :

- The Constitution (Scheduled Castes) Order , 1950
- * The Constitution (Scheduled Tribes) Order , 1950

2) **Kumari Gaikwad Jyoti Laxman**
and for his /her family ordinarily(s) in village / town **Hattur S Solapur** of
Solapur District / Division of the State / Union Territory of **Maharashtra.**



[Signature]
Sub-Divisional Officer Solapur
SUB-DIVISIONAL OFFICER
SOLAPUR NO. 2, SOLAPUR.

No. MAHAR / 944 / 2014
Place: Solapur
Date: 23/07/2014

* Please delete the words which are not applicable.

Note - The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation of the peoples Act , 1950.



11007142996

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



GOVERNMENT OF MAHARASHTRA
Social Justice and Special Assistance Department

CERTIFICATE OF VALIDITY

[Rules 17(6), 17(10) and 17(11)(iii)(a)]

No. A

1129633

CASTE CERTIFICATE SCRUTINY COMMITTEE Pune Division, Committee No. 1, Solapur

Committee Decision No Education/14321

, dated 07.08.2015

WHEREAS, an application of **Gaikwad Jyoti Laxman**
dated **22.07.2015** along with the documents was received by the Scrutiny Committee for verification
of Caste Certificate of **Scheduled Caste** and the same was placed before
the said Committee in the meeting held on **07.08.2015**

AND WHEREAS in accordance with the powers conferred on it under Maharashtra Scheduled
Caste, Scheduled Tribes, De-Notified Tribes (Vimukta Jatis), Nomadic Tribes, Other Backward Class
and Special Backward Category (Regulation of Issuance and Verification of) Castes Certificate Act,
2000 (Mah. XXIII of 2001); Maharashtra Scheduled Castes, De-notified Tribes (Vimukta Jatis),
Nomadic Tribes, Other Backward Class and Special Backward Category (Regulation of Issuance and
Verification of) Caste Certificate Rules, 2012, the Committee on the basis of the documents and
evidence produced before it verified and scrutinised the said Caste Certificate/Claim.

NOW, THEREFORE, the Committee hereby certifies that caste claim is found to be correct and the
caste certificate bearing No **No.MAG/SR/944/2014** dated **23.07.2014**
issued by the **Sub Divisional Officer Solapur No.2, Solapur** District **Solapur**
certifying that **Gaikwad Jyoti Laxman**
belongs to **Mahar (SC-37)** Caste/Tribe is found to be VALID.



Member Secretary & Research Officer
Caste Certificate Scrutiny Committee
Pune Division, Committee No. 1, Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

SIDDHANATH INSTITUTE OF NURSING (GNM)

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra
Affiliated to: Maharashtra University of Health Science

Mob. 9730402627

Add. Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 413304

EXPERIENCE CUM RELIVING CERTIFICATE

It is certified that, *Jyoti Laxman Gaikwad* had worked on ad-hoc / temporary / regular teacher in fulltime capacity Siddhanath Institute Of Nursing College Pandharpur as a Tutor

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		Form	To
01	Tutor	1/12/24	30/01/26

During the said period his / her work and conduct was satisfactory. He / she has been relived / discharged from the service from *30/01/2026*

He / she bear good moral character. We wish him / her all the best for his / her future endeavours.

This certificate is given as per his / her request.

Date: *30/01/2026*

Place: Pandharpur

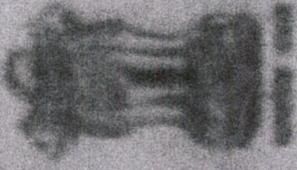

Principal

Siddhanath Institute of Nursing (GNM)
Korti, Tal. Pandharpur, Dist. Solapur-413304

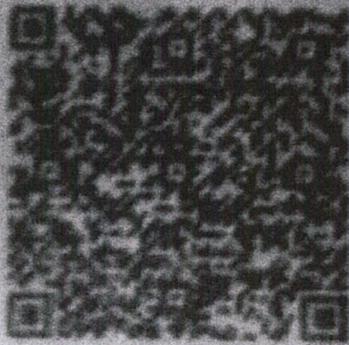

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

CCBPG0228B

नाम / Name

JYOTI LAXMAN GAIKWAD

पिता का नाम / Father's Name

LAXMAN GAIKWAD

जन्म तिथि / Date of Birth
28/11/1998



Principal
Lifetime Institute of Nursing
Pandharpur, Dist. Solapur

Jyoti Gaikwad
हस्ताक्षर / Signature

30032017



भारतीय विधिकार प्रहसन प्राधिकरण
भारत सरकार
 Unique Identification Authority of India
 Government of India



E-Aadhaar Letter

नोंदणी क्रमांक/Enrolment No.: 2085/27536/41215

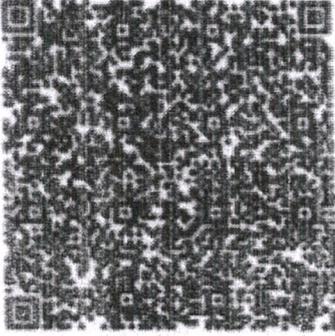
Jyoti Laxman Gaikwad (ज्योती लक्ष्मण गायकवाड)
 2, raighad Apartment, Hotgi road, near pethe industris,
 solapur, Solapur North, Solapur,
 Maharashtra - 413003

सुचना

- आधार ओळखीचे प्रमाण आहे, नागरीत्वचे नाही.
- ओळखीचे प्रमाण ऑनलाईन ऑथेन्टीकेशन द्वारा प्राप्त करा.
- हे इलेक्ट्रॉनिक प्रिंटेचे द्वारा तयार झालेले एक पत्र आहे.

तुमचा आधार क्रमांक/ Your Aadhaar No.:

7673 8448 5106



INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

आधार-सामान्य माणसाचा अधिकार

1947
 1800 300 1947
 help@uidai.gov.in
 www.uidai.gov.in

Signature valid
 Digitally signed by Jyoti Laxman Gaikwad (Shardha)
 Date: 2018.07.19 15:08:15 IST

- आधार देशभरात मान्य आहे.
- आधार साठी आपण एकराच नामांकन नोंदणीची आवश्यकता आहे.
- कृपया आपल्या सध्याचा मोबाइल नंबर व ई-मेल पत्ता नोंदवा. यामुळे आपल्या विभिन्न सुविधा प्राप्त करण्यासाठी मदत मिळेल.

- Aadhaar is valid throughout the country.
- You need to enrol only once for Aadhaar.
- Please update your mobile number and e-mail address. This will help you to avail various services in future.



भारत सरकार
 GOVERNMENT OF INDIA



भारतीय विधिकार प्रहसन प्राधिकरण
 Unique Identification Authority of India



ज्योती लक्ष्मण गायकवाड
Jyoti Laxman Gaikwad
 जन्म तारीख/ DOB: 28/11/1998
 महिला / FEMALE



पत्ता:
 2, रायगड अपार्टमेंट, होटगी
 रोड, पेठे इंडुस्ट्रीज जवळ,
 सोलापूर, सोलापूर नॉर्थ,
 सोलापूर,
 महाराष्ट्र - 413003

Address:
 2, Raighad Apartment, Hotgi road,
 near pethe industris, solapur, Solapur
 North, Solapur,
 Maharashtra - 413003

Chopade
 Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Chopade

Date: 10/07/2015



Siddhanath Foundation Charitable Trust's

LIFELINE INSTITUTE OF NURSING

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra

Affiliated to: Maharashtra University of Health Science

Mob. 9730402627 E-mail: lifelineinstituteofnursing@gmail.com

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

SFCT | LION | 24 | 2026

Appointment Order

To,

M.S. Kajal J. Ahadage.
A/P: Wakli, Tal - Sangola
Dist. Solapur.

Subject: Appointment on the post Tutor

Sir / Madam,

With reference to your application dated 17/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of..... Tutor

The Terms and Conditions of your appointment are as follows:

- 1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, you are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 24,000/-. With starting pay of Rs. 24,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

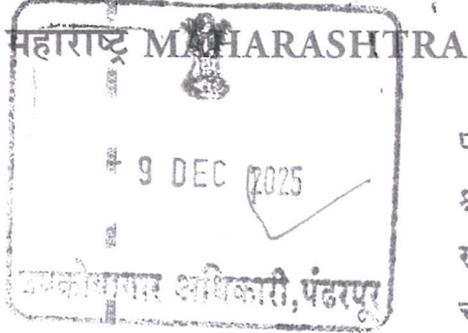
- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,

Chopade
Principal
President / Secretary
Lifeline Institute of Nursing
Principal, Dean or Director
Pandharpur, Dist. Solapur
(Any one competent authority to sign the appointment order)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



2025

60AB 556087

पंढरपूर विक्री नं. २५०० २५००६
श्री. _____
रा. _____
चा मागितलेवारी नं. १०१ २५००
चा भरतीस रुपये _____ चे जनरल स्टॅप दिले.

२५००६
२५००६

प्रफुल्ल पां. नगरपूर स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs. Kajal... Jaganath... Ghadage..... age 25... years,
permanent resident of ALP-Waki, Shivame, Tal-Sangola, Dist.-Solapur.... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Tutor.....

At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide appointment order No. SFCT/UNW/26/2026 dated 12/02/2026 in the pay scale / consolidated pay as 24,000/-.....

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs. Kajal. J. Ghadage..... am signing

This document on this 12th Day of Feb. 2026. At Pandharpur.

Date: 12/02/2026

Ghadage
Signature

Place: Pandharpur

Kajal. Ghadage
(Name)

- 1) Signature of Witness..... [Signature]
Name and Address of Witness..... Sunita Bagel.....
- 2) Signature of Witness..... [Signature]
Name and Address of Witness..... Om. S. Yalgunde.....

Acceptance of the Appointment

Dr _____

From : Ms. Kajal J. Ahadga
A/P - Blaki Tal - Sangola
Dist - Solapur.
(Full resi. Add)Date : 12/02/26

To,

PrincipalLifeline Institute of Nursing.**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/LION/24/2026 dated 12/02/26**

Sir/Madam,

I have received the above cited appointment order on SFCT/LION/24/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Phadga
Yours faithfully,

(Kajal Ahadga)

Appendix - VI

Joining Report

Dr _____

From : Ms. Kajal J. Ahadga
A/P - Blaki, Tal - Sangola
Dist - Solapur.
(Full resi. Add)Date : 12/02/2026

To,

PrincipalLifeline Institute of Nursing.**Subject : Joining Report****Reference : Your appointment order No. SFCT/LION/24/2026 dated 12/02/26**

Sir/Madam,

I have receive the above cited appointment order on SFCT/LION/24/2026 I am accepting the same and joining to the post of Tutor in the subject of Nursing w.e.f. (before noon / afternoon).

Phadga
Yours faithfully,

Allow to Join

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
12/2/26

(Kajal Ahadga)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)

UNDERTAKING OF TEACHERI, Dr./Vd. Ms. Kajal Jagannath Ahadage,Resident of (Permanent home Address) A/P - wakli, Shivame, Tal -
Sangola, Dist - Solapur.Presently residing at (Present home Address) A/P - wakli, Shivame, Tal -
Sangola, Dist - Solapur.

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Nursing at Lifeline Institute of Nursing.
(Name of the college)

2. My working hours at the College are from 9:00 AM to 5:00 PM

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

4. Practicing / not practicing Not Practicing

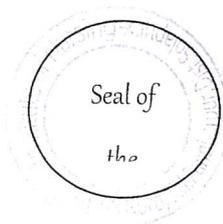
5. If practicing, the place of practice is _____

6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes / No
(If yes, attach copy of the letter.)

Date : 12/02/2026Signature Chadage,Place : PandharpurName : Ms. Kajal. J. AhadageDesignation : TutorDate : 12/02/2026

Countersigned by Dean / Principal _____

Place : pandharpur.Name : Gunpriya chopade.

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

(To be typed on Plain Paper)

RESUME

Personal information:-

Name :- Kajal Jagannath Ghadage
Contact no :- 7558739049
Email id :-kajalghadage7@gmail.com
Address :- WAKi Sangola solapur
Date of birth :-06/01/2000
Gender :- female
Marital status :- unmarried
Nationality :- india
Language Known :- English, Marathi, hindi
Hobbies :- reading books , writing books

Qualification

Sr no	Exam	Board	Yr of passing	Percentage
1	B. BSC NURSING	MUHS	2021	72

Registered nurse :- II-33719

Professional experience

SR. NO	POST	EXPRIANCE FROM	TILL
01	NURSING TUTOR	15/03/2022	31/05/2023

Skills:-

- 1) Leadership
- 2) Vitals
- 3) Documentation
- 4) Communication skills

Declaration:-

I hereby declare that the above information is correct up to my knowledge I bear the responsibility for the correctness of particulars

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



अष्टविनायक फाऊंडेशन संचलित,

College Code : 1169

आर्यवीर इन्स्टिट्यूट ऑफ नर्सिंग, सरळगांव

कल्याण- नगर हायवे, सरळगांव, ता. मुरबाड, जि. ठाणे

Email :- arya.nursing@gmail.com

संपर्क : 9226884614, 9423260846

जावक क्र. 02(35)/2023

Date : 01/06/2023

RELEAVING ORDER

Miss. **Kajal Jagannath Ghadage** had worked in Aryaveer Institute of Nursing, Saralgaon Tutor Form 15.03.2022 To 31.05.2023 and He relived from institution on 31.05.2023

Amal

SECRETARY

ASHTAVINAYAK FOUNDATION SANCHALIT
ARYAEEER INSTITUTE OF NURSING
SARALGAON, TAL. MURBAD, DIST. THANE

Chopade

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



अष्टविनायक फाऊंडेशन संचालित,

College Code : 1169

आर्यवीर इन्स्टिट्यूट ऑफ नर्सिंग, सरळगांव

कल्याण- नगर हायवे, सरळगांव, ता. मुरबाड, जि. ठाणे

Email : arya.nursing@gmail.com

संपर्क : 9226884614, 9423260846

जावक क्र. ११/२०२३

Date: 01/06/2023

Experience Certificate

This is Certify that. Miss. Kajal Jagannath Ghadage Worked as a Nursing Tutor from 15.03.2022 to 31.05.2023 in our Aryaveer Insitute of Nursing, Saralgaon, Tal. Murbad, Dist. Thane

His/her Conduct is Found Good and Sincere. His/her performance is very satisfactory towards his/her duty.

(Signature)

SECRETARY

ASHTAVINAYAK FOUNDATION SANCHALIT
ARYAEEER INSTITUTE OF NURSING
SARALGAON, TAL. MURBAD, DIST. THANE

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

LIFELINE INSTITUTE OF NURSING

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra
Affiliated to: Maharashtra University of Health Science

Mob. 9730402627

E-mail: lifelineinstituteofnursing@gmail.com

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 413304

EXPIRIANCE CERTIFICATE

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Miss. Kajal Jagannath Ghadage** is working with us at Lifeline Institute of Nursing, Pandharpur Solapur for the following period & post:

1) 31-07-24 to till date. (Tutor)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Date: 30/07/2024

EXPERIENCE CERTIFICATE

It is certified that, **Mrs. Kajal Jagannath Ghadage** had worked on ad-hoc / temporary / regular teacher in fulltime capacity **Lifeline Institute Of Nursing College Pandharpur** as a **Tutor**

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		Form	To
01	Tutor	02/10/2023	30/07/2024

During the said period his / her work and conduct was satisfactory. He / she has been relived / discharged from the service from **30/07/2024**

He / she bear good moral character. We wish him / her all the best for his / her future endeavours.

This certificate is given as per his / her request.

Date: 30/07/2024

Place: Pandharpur



[Signature]
30-07-2024
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Maharashtra Nursing Council
Mumbai



CD-98004





Certificate of Registration
Registration No. XVI- 30506
This is to certify that
MS. GHADAGE KAJAL JAGNATH

Possessing the qualification of **B. SC. NURSING**
has been duly registered under the Maharashtra Nurses Act, 1955
(Act No. 33 of 1955), in part 1 of the Register for Rest of Maharashtra
Region in Section XVI as a registered **MIDWIFE**

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Mumbai, and the signature of the President & Registrar.
Subject to the provisions of the said Act, this certificate is

Valid upto 30/03/2027
Dated the **03rd February 2022**



Registrar



President / Administrator

In witness whereof are herewith affixed the seal of the Maharashtra Nursing Council, Mumbai, and the signature of the President & Registrar.

Chopoda
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopoda
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



2021210496



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मुलभूत विज्ञान स्नातक (परिचर्या)

ही पदवी तक्राळी-२०२२ मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
अकलूज, सोलापूर येथील विजयसिंह मोहिते-पाटील कॉलेज ऑफ नर्सिंग, मेडीकल
रिसर्च इन्स्टीट्यूट चे/च्या
घाडगे काजल जगन्नाथ
यांना

०२ मार्च २०२२ च्या दिवशीत समारंभान प्रदान करात आहोत

We, the Chancellor, Pro-Chancellor, Vice Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Basic Bachelor of Science (Nursing)

on
Ghadage Kajal Jagannath

(PRN 0518163881)

of
Vijaysinh Mohite-Patil College of Nursing & Medical Research Inst. Akluj, Solapur

for the examination held in Summer-2021
at the Convocation held on 02nd March 2022



20800113521



M. Kantkar

VICE-CHANCELLOR
कुलगुरु

Chopode
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopode
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र राज्य माध्यमिक व उच्च माध्यमिक शिक्षण मंडळ, पुणे
Maharashtra State Board Of
Secondary and Higher Secondary Education, Pune
माध्यमिक शालान्त प्रमाणपत्र
SECONDARY SCHOOL CERTIFICATE

असे प्रमाणित करण्यात येते की / This is to certify that

Ghadage Kajal Jagannath

आईचे नांव / Mother's Name **Kanta**

विभागीय मंडळ Divisional Board	आसन क्रमांक Seat No.	केन्द्र क्रमांक Centre No.	शाळा क्रमांक School No.	प्रमाणपत्राचा अनुक्रमांक Sr. No. of Certificate
PUNE	G267066	3171	24.10.050	251007

माध्यमिक शालान्त प्रमाणपत्र परीक्षा

has passed the SECONDARY SCHOOL CERTIFICATE EXAMINATION MARCH-2015

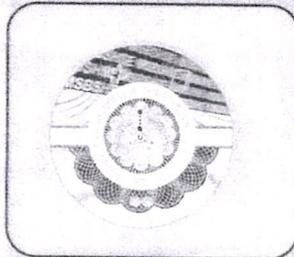
श्रेणीमध्ये खाली दर्शविलेले विषय घेऊन उत्तीर्ण झाला/झाली आहे.

in Grade **DISTINCTION** with subjects shown below.

मुख्य विषय Main Subjects	कमाल गुण Max. Marks	प्राप्त गुण Marks Obtained	श्रेणीचे विषय Subjects of Grade	श्रेणी Grade
MARATHI (1ST LANG)	100	089	(WORK EDN./PRE-VOC.)	
HINDI (2/3 LANG)	100	085	MILK & MILK PRODUCTS	A
ENGLISH (2/3 LANG)	100	083	(SCHOOL SUBJECTS)	
MATHEMATICS	100	086	HEALTH & PHYSICAL EDUCATION	A
SCIENCE & TECHNOLOGY	100	072	SOCIAL SERVICE	A
SOCIAL SCIENCES	100	093	PERSONALITY DEVELOPMENT	A
			INFORMATION COMMUNICATION TEC	A
एकूण गुण/Total Marks	500	436	PERCENTAGE \approx 87.20	
एकूण प्राप्त गुण (अक्षरी)/ Total Marks Obtained (In Words)	FOUR HUNDRED AND THIRTYSIX			
जन्म दिनांक / Date of Birth	06/01/2000 (SIXTH JANUARY TWO THOUSAND)			

CS151251007

PUNE
08TH JUNE 2015



3012237465439

[Signature]

विभागीय सचिव/Divisional Secretary

[Signature]
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

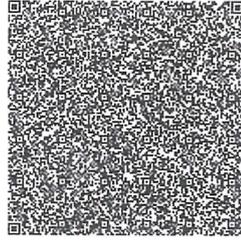


भारत सरकार
Government of India

भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

नोंदणी क्रमांक:/ Enrolment No.: 0000/00506/53919

To
काजल जगन्नाथ घाडगे
KAJAL JAGANNATH GHADAGE
D/O: Jagannath,
VTC: Waki Shivane,
PO: Waki(sangola),
Sub District: Sangole,
District: Solapur,
State: Maharashtra,
PIN Code: 413307,
Mobile: 7558739049



Validity unknown
Digitally signed by Unique Identification Authority of India
DN: cn=Unique Identification Authority of India, o=UIDAI, ou=UIDAI, email=uidai@uidai.gov.in, c=IN, date=2024.08.21 11:49:35 GMT+05:30

आपला आधार क्रमांक / Your Aadhaar No. :

5882 9202 0662

VID : 9142 0750 9330 8330

माझे आधार, माझी ओळख



भारत सरकार
Government of India



Aadhaar no. issued: 21/08/2015



काजल जगन्नाथ घाडगे
KAJAL JAGANNATH GHADAGE
जन्म तारीख/DOB: 06/01/2000
महिला/ FEMALE

आधार हा ओळखीचा पुरावा आहे, नागरिकत्व किंवा जन्मतारखेचा नाही.
हे फक्त पडताळणीसाठी वापरले जावे (ऑनलाइन प्रमाणीकरण किंवा QR कोडचे स्कॅनिंग/ ऑफलाइन XML).
Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

5882 9202 0662

माझे आधार, माझी ओळख



Government of India



माहिती / INFORMATION

- आधार हा ओळखीचा पुरावा आहे, नागरिकत्वाचा किंवा जन्मतारखेचा नाही. जन्मतारीख आधार क्रमांक धारकाने प्रस्तुत केलेल्या नियमांमध्ये निर्दिष्ट केलेल्या जन्मतारीख दस्तऐवजाच्या पुराव्याद्वारे समर्थित असलेल्या माहितीवर आधारित आहे.
- ह्या आधार पत्राची पडताळणी UIDAI-नियुक्त प्रमाणीकरण एजन्सीद्वारे ऑनलाइन प्रमाणीकरणाद्वारे किंवा ॲप स्टोअरमध्ये उपलब्ध mAadhaar किंवा Aadhaar QR स्कॅनर ॲप वापरून किंवा www.uidai.gov.in वर उपलब्ध सुरक्षित QR कोड रीडर ॲप वापरून QR कोड स्कॅनिंगद्वारे सत्यापित केले जावे.
- आधार अद्वितीय आणि सुरक्षित आहे.
- ओळख आणि प्रत्यात्ता आधार देणारी कागदपत्रे आधार नोंदणीच्या तारखेपासून दर 10 वर्षांनी आधारमध्ये अद्यतनित केली जावीत.
- आधार तुम्हाला विविध सरकारी आणि गैर-सरकारी लाभ/सेवांचा लाभ घेण्यास मदत करते.
- आधारमध्ये तुमचा मोबाईल नंबर आणि ईमेल आयडी अपडेट ठेवा.
- आधार सेवांचा लाभ घेण्यासाठी mAadhaar ॲप डाउनलोड करा.
- आधार/बायोमेट्रिक्स वापरत नसताना सुरक्षितता सुनिश्चित करण्यासाठी लॉक/अनलॉक आधार/बायोमेट्रिक्सचे वैशिष्ट्य वापरा.
- आधारची मागणी करणाऱ्या संस्थांनी संमती घेणे बंधनकारक आहे.
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.

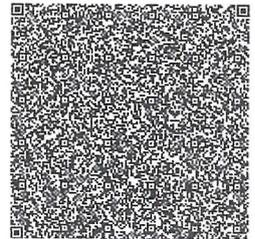


भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India



Details as on: 07/08/2024

पत्ता:
वडिलाचे/आईचे नांव: जगन्नाथ, वकी शिवाने, वकी सांगोळा,
सोलापूर,
महाराष्ट्र - 413307
Address:
D/O: Jagannath, Waki Shivane, PO:
Waki(sangola), DIST: Solapur,
Maharashtra - 413307



5882 9202 0662

VID : 9142 0750 9330 8330



1947



help@uidai.gov.in



www.uidai.gov.in

Pandharpur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopode
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग
INCOME TAX DEPARTMENT

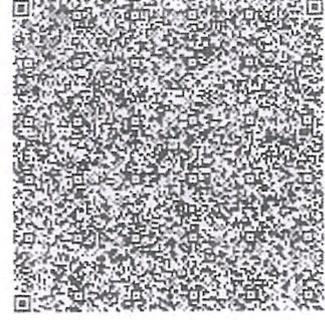


भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

CFLPG6135A



नाम / Name

KAJAL JAGANNATH GHADAGE

पिता का नाम / Father's Name

JAGANNATH DAMODAR GHADAGE

जन्म की तारीख /

Date of Birth

06/01/2000

D. Ghadage

हस्ताक्षर / Signature

17122021

Chopda
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur.

Chopda
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

SFCT / LION / 21 / 2026

D:- 12/02/2026

Appointment Order

To,

Kajal S. Salunkhe.
A/P - Rahimatpur, Tal - Koregaon,
Satara.....

Subject: Appointment on the post Tutor.....

Sir / Madam,

With reference to your application dated 16/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026.....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Tutor.....

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, you are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 22,000/- With starting pay of Rs. 22,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

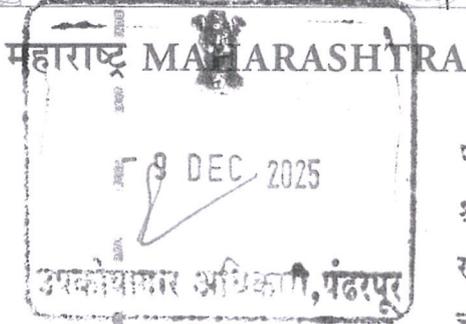
- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,

Chopade
Principal

President / Secretary /
Principal, Dean or Director
Lifetime Institute of Nursing
Pantnagar, Dist. Solapur
(Any one competent authority to sign the appointment order)



2025

60AB 556089

पंढरपूर विक्री नं. ४१०० तारीख २२/०२/२५
श्री. _____
रा. _____
चा मागितलेवध २५०० रु. _____
चा भरतीस रुपये २५०० चे जनरल स्टॅप दिले.

प्रफुल्ल पां. नरकर स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs. Kajal Suresh Salunkhe..... age 27 years,
permanent resident of A/P. Rahimatpur, Tal. Koregaon, S. Satara. do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Tutor

At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide appointment order No. SFCT/110N/21/2026 dated 12/02/2026.... in the pay scale / consolidated pay as... 22,000/-.....

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs... Kajal S. Salunkhe..... am signing

This document on this... 12th.... Day of Feb-2026 At Pandharpur.

Date: 12/02/2026



Signature

Place: Pandharpur.

Kajal S. Salunkhe
(Name)

1) Signature of Witness... .....
Name and Address of Witness... Kajal Ghadage, Pandharpur.

2) Signature of Witness... .....
Name and Address of Witness... Tejasri Bandgar, Pandharpur

Acceptance of the Appointment

Dr _____

From : Ms. Kajal. S. Salunkhe
A/P - Rahimatpur, Tal - Koregaon
Satorra
(Full resi. Add)Date : 12/02/26

To,

Principal _____Lifeline Institute of Nursing**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/LION/21/26 dated 12/02/26**

Sir/Madam,

I have received the above cited appointment order on SFCT/LION/21/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

(Signature)
(Kajal. S. Salunkhe)

Appendix - VIJoining Report

Dr _____

From : Ms. Kajal. S. Salunkhe
A/P - Rahimatpur, Tal -
Koregaon, Satorra.
(Full resi. Add)Date : 12/02/26

To,

Principal _____Lifeline Institute of Nursing**Subject : Joining Report****Reference : Your appointment order No. SFCT/LION/21/26 dated 12/02/26**

Sir/Madam,

I have receive the above cited appointment order on SFCT/LION/21/2026 I am accepting the same and joining to the post of TUTOR in the subject of Nursing w.e.f. (before noon / afternoon).

Yours faithfully,

(Signature)
(Kajal. Salunkhe)

Allowed to joinChopade
12/2/26

Note : The appointing authority should endorse the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Ms. Kajal. S. Salunkhe,Resident of (Permanent home Address) A/P - Rahimatpur, Tal -
Koregaon, Satara,Presently residing at (Present home Address) A/P - Rahimatpur, Tal -
Koregaon, Satara,

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Nursing at Lifeline Institute of Nursing
(Name of the college)

2. My working hours at the College are from 9:00 am to 5:00 pm
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing Not practicing,
5. If practicing, the place of practice is -
6. My practicing hours are from - to -

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature Place : Pandhar pur.Name : Ms. Kajal. S. Salunkhe,Designation : TutorDate : 12/02/2026Countersigned by Dean / Principal _____Place : Pandhar purName : Gumpriya Chopade.

Chopade
Principal

(To be typed on Plain Paper)

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

RESUME

Personal Information:

Name :- KAJAL SURESH SALUNKHE
Contact No. :- 9145259982
Email Id :- ksalunkhe692@gmail.com
Permanent Address :- Rahitmat Tal Koregaon Apshinge Satara
415511
Date of Birth :- 28/07/1999
Gender :- Female
Marital Status :- Unmarried
Nationality :- Indian
Language Known :- Marathi, Hindi, English,
Hobbies :- Listening Music And
Travelling

Qualifications :

Sr No.	Exam	Board	Year Of Passing	Percentage
1	S.S.C	Pune Board	2015	67.50 %
2	H.S.C	Pune Board	2017	71.25 %
3	BSC NURSING	MUHS Nashik	2021	60.00%

Registered Nurse :- Maharashtra State Nursing
Council

Professional Experience :-LIFELINE HOSPITAL PANDHARPUR 2 YEARS

Skills

- :-
- Leadership
 - Vitals
 - Documentation
 - Communication Skills

Declaration :-

I hereby declare that the above information is correct up to my
knowledge i
bear the responsibility for the correctness of particulars


Kajal Suresh Salunkhe


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



2021209126



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India

आम्ही, कुलपती, प्रतिकूलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मुलभूत विज्ञान स्नातक (परिचर्या)

ही पदवी उन्हाळी-२०२२ मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
बागेचीवाडी अकलुज येथील श्री.संत शिरोमणी नामदेव एज्युकेशन चॅरीटेबल ट्रस्टचे
सहारा इन्स्टीट्यूट ऑफ नर्सिंग चे/च्या

साळुखे काजल सुरेश
यांना

०२ मार्च २०२२ च्या दीक्षाते समारंभात प्रदान करित आहोत

We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Basic Bachelor of Science (Nursing)

on
Salunkhe Kajal Suresh

(PRN 0517133859)

of
Shri Sant Shiromani Namdeo Education Charitable Trust's Sahara Institute of Nursing,
Bagechiwadi-Akluj

for the examination held in Summer-2021
at the Convocation held on 02nd March, 2022



20BC0039621



VICE-CHANCELLOR
कुलगुरु

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Solapur

The authenticity of this certificate can be verified on our University website <http://www.muhs.ac.in>



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK



P.E. I No. 0517133859 Seat No. 180542

College : Shri Bani Shironani Namdeo Mahara, Charitable Trust, Sahara Institute of Nursing Education (B.Sc.), Baghelwadi-Aktuj Solapur

No. 21016893

PASSING CERTIFICATE

This is to certify that Smt./Smt.

SALUNKHE KAJAL SURESH

appeared for and passed the

FINAL BASIC B.Sc. (NURSING)

Examination held by the Maharashtra University of Health Sciences, Nashik

in Summer-2021

Nashik

Date : 20 November 2021
Chopack
Principal

[Signature]
Controller of Examinations

Report the discrepancy of Name, Year etc., (if any) in above Certificate to the University within Six months of issue of certificate.
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

[Signature]
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2100022876



Maharashtra Nursing Council Mumbai

126571



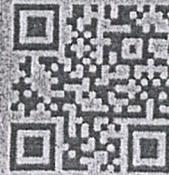
Certificate of Registration

Registration No. II- 33094

This is to certify that

MS. SALUNKHE KAJAL SURESH

CD:95142



Possessing the qualification of **B. SC. NURSING** has been duly registered under the Maharashtra Nurses Act, 1966 (Mah. N. of 1966), in part I of the Register for Rest of Maharashtra Region in Section II as a registered **NURSE**

In witness whereof are herewith affixed the seal of the Maharashtra Nursing Council, Mumbai, and the signature of the President & Registrar. Subject to the provisions of the said Act, this certificate is

Valid upto **30/03/2027**

Dated the **10th January 2022**

[Signature]

Principal

President/Administrator

- 1) Renewal of Registration, Change of Name & Change of Address is responsibility of the holder of this Certificate.
- 2) The Registration Certificate is issued on the basis of previous Registration Certificate of holder.
- 3) Any violation or infringement of this instruction, on the front side of this Certificate will result in the cancellation.

[Signature]

State Nursing Council

dem

is a technology enabled document. Download the mobile app from <http://lifelineapp.com> for online verification and further details

Pandharpur, Dist. Solapur

Nursing
Solapur



LIFELINE SUPERSPECIALITY HOSPITAL

Date

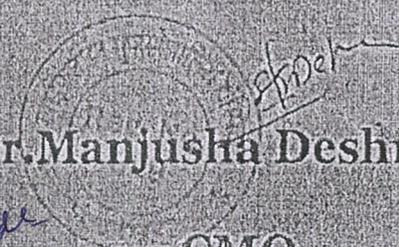
R

Date- 06/06/2023

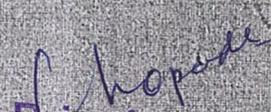
Experience Certificate

This is to certify that Miss. Kajal Suresh Salunkhe, Has worked in our Lifeline Superspeciality Hospital as Staff Nurse in ICU department From 21/11/2021 to 06/06/2023.

Lifeline superspeciality Hospital is a 100 bedded hospital, with all Specialities.

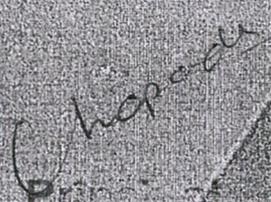

Dr. Manjusha Deshmukh.

CMO


Principal

Lifeline Institute of Nursing
Pandharpur Dist. Solapur

No. 4776/90/91/92/1 2, Datta Nagar, New Karad Naka Road
NDHARPUR - 413 304. Mob-7293929293, 7888012000
ail - lifelinepandharpur@gmail.com


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

LIFELINE INSTITUTE OF NURSING

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra
Affiliated to: Maharashtra University of Health Science

Mob. 9730402627 E-mail: lifelineinstituteofnursing@gmail.com

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

EXPERIENCE CERTIFICATE

It is certified that, *Kajal Suresh Salunphe* had worked on ad-hoc / temporary / regular teacher in fulltime capacity **Lifeline Institute Of Nursing College Pandharpur** as a Tutor

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		Form	To
01	Tutor	01/12/2023	fill date

During the said period his / her work and conduct was satisfactory. He / she has been relived / discharged from the service from

He / she bear good moral character. We wish him / her all the best for his / her future endeavours.

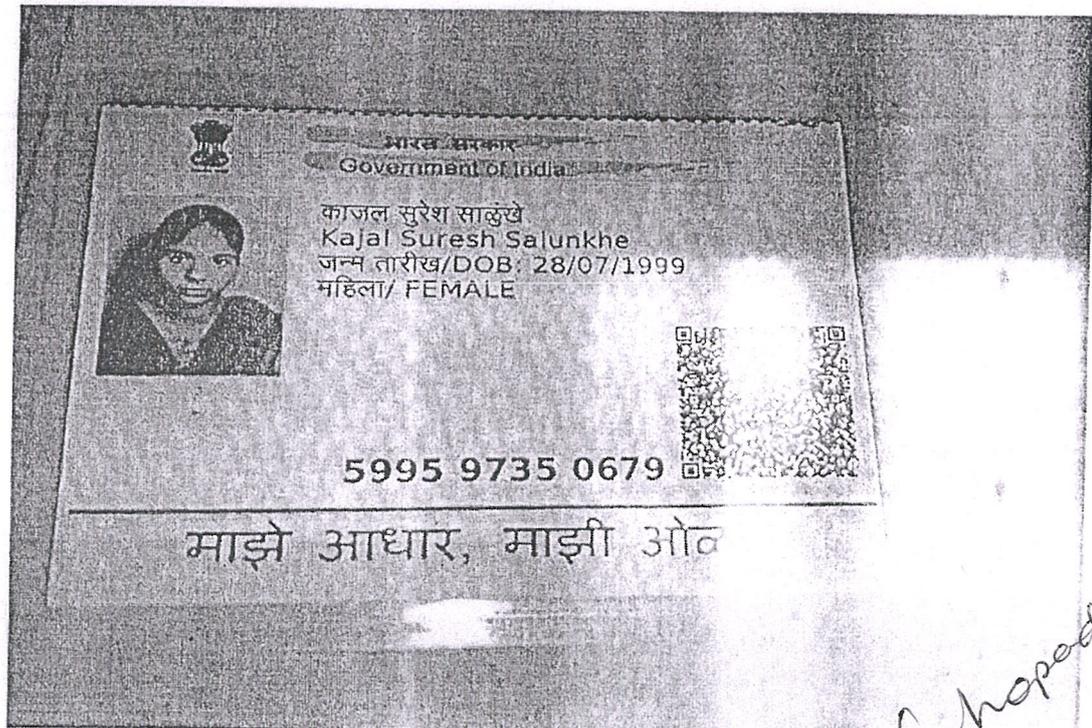
This certificate is given as per his / her request.

Date: 12/02/2026

Place: Pandharpur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur /


भारतीय विशिष्ट आंकड़ा प्राधिकरण
Unique Identification Authority of India

Address:
 mali galli, at / post - rahimatpur
 taluka - Koregaon, Apshinge,
 Satara,
 Maharashtra - 415511

पता:
 माली गल्ली, पु / पोस्ट
 कोरगाव, अपशिंके,
 महाराष्ट्र - 415511

5995 9735 067

 1947
  help@uidai.gov.in

Chopade

Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Chopade

Principal
 Lifeline Institute of Nursing
 Pandharpur

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
JOJPS7774M

नाम / Name
KAJAL SURESH SALUNKHE

पिता का नाम / Father's Name
SURESH SAHEBRAO SALUNKHE

जन्म की तारीख / Date of Birth
28/07/1999

A PAN Application Document

15072018



Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

Ref-No. / SFCT / LIGN / 38 / 2026

Date: 12/2/2026

Appointment Order

To,

Mrs. Kanita M. Pandey.
Ahemari, Pune.

Subject: Appointment on the post ..ASS.:lecturer

Sir / Madam,

With reference to your application dated 17/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of ..ASS.:lecturer..

The Terms and Conditions of your appointment are as follows:

- 1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 35,000/- With starting pay of Rs. 35,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,

Chopade

President / Secretary /

Principal, Dean or Director

(Any one competent authority to sign the appointment order)

Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

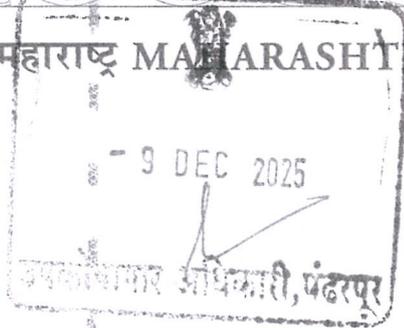
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556098



पंढरपूर विक्री नं. २५०० तारीख २२/०६

श्री. _____

रा. _____

चा मागितलेवहन हा रु. _____

चा भारतीय रुपये _____ चे जनरल स्टॅप दिले.



Sub Clerk
21
K. S.

प्रफुल्ल पां. अमरनाथ स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs.....Kanita Mukesh Pandey..... age 33 years,
permanent resident of Ale - Phanozi, Pune..... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

I) That, I am appointed temporarily as fulltime Assistant lecturer.
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide appointment order No. SFCT/LION/38/2026 dated 12/02/2026 in the pay scale / consolidated pay as 3510001/-

II) That, I was joined / am joining on the said post from child health Nursing subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs. Kanita. M. Pandey am signing

This document on this 12th Day of Feb 2026 At Pandharpur.

Date: 12/02/2026

Signature

K. Pandey

Place: Pandharpur

(Name)

Mrs. Kanita. M. Pandey

1) Signature of Witness B

Name and Address of Witness Mrs. Tejashri. B. Bondagar

2) Signature of Witness S

Name and Address of Witness Mrs. Sumita Bagal

Acceptance of the Appointment

Dr _____

From : Ms. Kanita. M. Pande
Dharoni, Pune

(Full resi. Add)

Date : 12/02/2026

To,

Principal
Lifeline Institute of Nursing**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/LION/38/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

K. Pande
(_____)

Appendix - VIJoining Report

Dr _____

From : Ms. Kanita. Pande
Dharoni, Pune

(Full resi. Add)

Date : 12/02/2026

To,

Principal
Lifeline Institute of Nursing**Subject : Joining Report****Reference : Your appointment order No. SFCT/LION/38/2026 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Ass. Lecturer in the subject of Child Health Nursing w.e.f. (before noon / afternoon).

Allowed to join

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Yours faithfully,

K. Pande
(_____)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.
(Please provide Copy to the concerned employee.)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Ms. Kavita. M. PandeyResident of (Permanent home Address) Phomoz PunePresently residing at (Present home Address) Phomoz Pune

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of child Health at lifeline institute of Nursing
Nursing (Name of the college)

2. My working hours at the College are from 9.00 AM to 5.00 PM

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

4. Practicing / not practicing Not Practicing

5. If practicing, the place of practice is _____

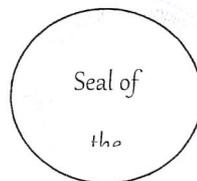
6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature K. PandeyPlace : PandharpurName : Kavita PandeyDesignation : Ass. lecturerDate : 12/02/2026

Countersigned by Dean / Principal _____

Place : PandharpurName : Cumpraja Chopade

Principal

Lifeline Institute of N.
Pandharpur, Dist. Solapur

(To be typed on Plain Paper)

Chopade
PrincipalLifeline Institute of Nursing
Pandharpur, Dist. Solapur



Maharashtra Nursing Council Mumbai

2300013525

A.Q.No. 19226

Date : 04/11/2025

CERTIFICATE OF ADDITIONAL QUALIFICATION

This is to certify that

MRS. KAVITA MUKESH PANDEY

Nee MS. KAVITA RIKHARI

of

B-105, SKYWAYS SERENO NEAR D.Y. PATIL COLLEGE, BACK TO PORWAL ROAD,
DHANORI, LOHEGOAN 411047 PUNE CITY, PUNE, MAHARASHTRA 411047

hearing Registration No.: XVII-39947

Dated : 27/06/2024

is trained at

DR. D. Y. PATIL COLLEGE OF NURSING, PUNE

and have successfully passed the examination of

M.Sc(Child Health Nursing)

held by

DR. D.Y. PATIL VIDYAPEETH, DEEMED UNIVERSITY, PUNE.

in

July 2023

This additional qualification is recorded in the register of Council on

04/08/2025

Receipt No: 25322

Registrar
Maharashtra Nursing Council,
Mumbai

President
Maharashtra Nursing Council,
Mumbai



- 1) Addition/ Alteration or any infringement of this instruction on the front of this Certificate will result in the cancellation.
- 2) Verification of this certificate.

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

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Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2301208

DPU

Dr. D. Y. Patil Vidyapeeth, Pune

(Deemed to be University)
Pimpri, Pune - 411 018.



Passing Certificate

This is to Certify that Shri / Smt. **Kavita Rikhari** has

appeared and passed the **M. Sc. Nursing** Examination,

held by Dr. D. Y. Patil Vidyapeeth, Pimpri, Pune in the month of **July 2023**

Seat No. : **MN-IV-4005**

P. R. No. : **210702008**

Date : **07/08/2023**



Controller of Examinations

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2300013525

33505



Maharashtra Nursing Council Mumbai

Certificate of Registration

Reciprocal Registration.
Registration No. XVII- 39947
This is to certify that



**MRS. PANDEY KAVITA MUKESH
NEE MS. RIKHARI KAVITA**



CD 144675

**Possessing the qualification of B.SC.NURSING & MIDWIFERY
has been given Reciprocal Registration under the Maharashtra Nurses Act
1966 (Mah.XI of 1966) in part 1 of the Register for REST OF MAHARASHTRA Region in
Section XVII for the purpose of employment/education at the SANCHETI INSTITUTE OF NURSING EDUCAT as a NURSING TUTOR
In witness whereof are herewith affixed the seal of the Maharashtra Nursing Council, Mumbai and
the signature of The President and The Registrar subject to the provisions under section 18(A) of the said Act.
This Certificate is valid from 27/06/2024 upto 26/06/2025*

Registrar

President/Administrator

Form 16
(Rule 79(2))

U/PAR PRADESH Regd. No. 1767 Dt. 2017/04/04 - D.O. 18/05/2017

Add up the registration number of any infringement of this instruction on front side of this certificate is void in the certificate of this council.

This is a technology enabled document. Download the mobile app from <http://secdoc.com/vasant> for online verification and further details.

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Renewal Slip [Rule 79(2)]

Renewal No. 201703330909

Registration No. XVII-39947

Receipt No & Date 1752925219 19/07/2025

This is to Certify that the Registration of **MRS. KAVITA MUKESH PANDEY
Nee MISS. KAVITA RIKHARI**

Section XVII for the purpose of employment at the **SANCHETI INSTITUTE OF NURSING EDUCATION, PUNE**

AS CLINICAL INSTRUCTOR

is Renewed upto **29/07/2028**

Note: Please attach this slip on the back side of your registration certificate



Registrar

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

S.No. 40



TEERTHANKER PARSVNATH SCHOOL OF NURSING

Vill. Bakenia, Post. Pakwara SEZ Road , Moradabad (U.P) 244001

Constituent College of Teerthanker Mahaveer University

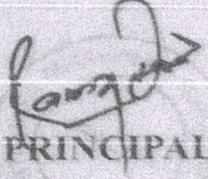
Recognised by the Indian Nursing Council and U.P. Nurses & Midwives Council

2013 - 2017

COURSE COMPLETION CERTIFICATE

Certified that Mr. / Ms. KAVITA RIKHARI
Son/Daughter of DHARMANAND RIKHARI has
undergone B.Sc.(N) course in Nursing at Teerthanker Parsvnath
School Of Nursing, Moradabad from 15/08/2013
to 31/07/2017. During this period He/She has completed all the
requirements in Theory and Practical Training as per the Indian Nursing Council
requirements and the University Syllabus. He / She appeared in the
Final B.Sc.(N) University Examination conducted by the
Teerthanker Mahaveer University, Moradabad during 2017.

MORADABAD
DATE: 22/08/2017


PRINCIPAL


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

24000012

DPU Dr. D. Y. Patil Vidyapeeth Pune (India)

(Deemed to be University)
(Under Section 3 of the UGC Act, 1956)



*We, the Chancellor, the Pro-Chancellor, the Vice-Chancellor,
the Pro Vice-Chancellor, the Members of the Executive Council and the
Academic Council of Dr. D. Y. Patil Vidyapeeth, Pune certify that*

Kavita Rikhari

[Student of Dr. D.Y. Patil College of Nursing, Pimpri, Pune]

having been examined and found duly qualified

for the degree of

Master of Science (Nursing) (Child Health Nursing)

*and has secured First Class
in July 2023.*

*The said degree has been conferred on her at the
Fifteenth Convocation held on Thirteenth April Two Thousand Twenty Four.*

In testimony whereof is set the seal of the said University.

Hawal

Vice Chancellor

PRN : 210702008



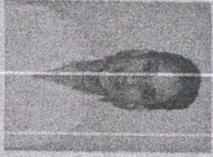
Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

TERTIARY MAJHADEER UNIVERSITY

Established by the Uttar Pradesh State Legislature Act No. 30 of 20081



Aadhar No.
283611564327

On the recommendation of the Academic Council,
the University hereby confers the degree of
Bachelor of Science in Nursing

upon

Kavita Rikhari

Daughter of **Shamshad Rikhari and Bhawana Rikhari** who has successfully completed

the requirements prescribed by the University for the award of this degree in

Final Division in the **Year 2017**

Balraj
Controller of Examinations

Chopra
Vice-Chancellor

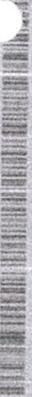
Division

Singh
Principal

Chopra
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

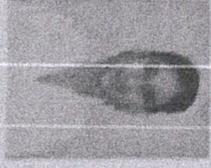
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Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



तीर्थंकर महावीर विश्वविद्यालय

(उत्तर प्रदेश विभाषिका अधिनियम संख्या 30, सन 2008 द्वारा स्थापित)



आधार संख्या
2N3611564127



विश्वविद्यालय की विद्या परिषद् की अनुशंसा पर

कविता रिखारी

सुपुत्री धर्मानन्द रिखारी एवम् भावना रिखारी को विश्वविद्यालय द्वारा

विहित अपेक्षाओं को वर्ष 2017 में सफलतापूर्वक पूर्ण करने पर

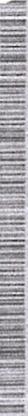
बैचलर ऑफ साइंस इन नर्सिंग

की उपाधि प्रथम श्रेणी में प्रदान की जाती है।

Balwanshahi
परीक्षा निबंधक

Chopade
कुलपति

दिनांक : 01.10.2017



पुणे, महाराष्ट्र, भारत

नारायण संख्या : TNIR13/013

Chopade
Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

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Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



भारत सरकार
Government of India



Issue Date: 08/04/20



कविता मुकेश पांडेय
Kavita Mukesh Pandey
जन्म तारीख/DOB: 01/04/1995
महिला/ FEMALE

2836 1155 4327

VID : 9191 5225 7945 0883

माझे आधार, माझी ओळख

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade

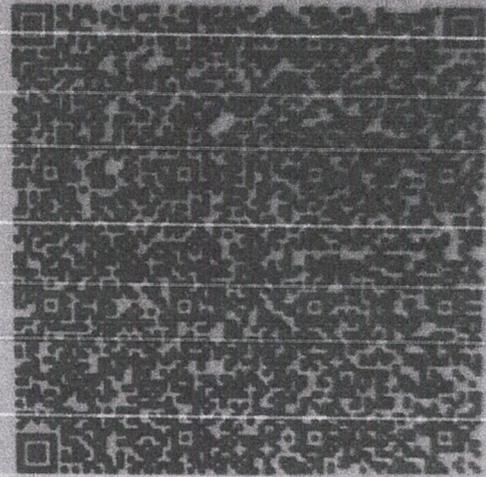
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Lifeline Institute of Nursing
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भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India



पत्ता:
फ्लॉट नो B105 स्कयवाय्स सेरेनो, पोरवाल रोड, नेट रा
कनॉलेज सिटी पुणे, धानोरी, पुणे सिटी, पुणे,
महाराष्ट्र - 411047



Download Date: 16/12/2017

Address:
FLAT NO B105 SKYWAYS SERENO, PORWAL
ROAD, NEAR DY KNOWLEDGE CITY PUNE,
DHANORI, Pune City, Pune,
Maharashtra - 411047

2836 1155 4327

VID : 9191 5225 7945 0883



1847



help@uidai.gov.in



www.uidai.gov.in

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Vishrabharati Mahila, Seva Samiti Mandal's Sanchaliti

Anbajogal Institute of Nursing

AMBANOJAL, Dist. Beed Mob- 9405100055, 9921757601

Email- lahanebalasaheb555@gmail.com

Ref. No

Date : 01 / 12 / 2023

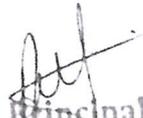
EXPERIENCE CUM RELIEVING CERTIFICATE

It Is Certified That *Mrs. Kavita . M . Pandey* Had Worked
On Ad-Hoc/ Temporary/ Regular Teacher In Fulltime Capacity Ankita Daund
College Of Nursing As Tutor

His/Her Experience In The Said College /Institute Is As Under

SR. NO	POST	EXPERIENCE	
		FROM	TO
01	TUTOR	01/12/2020	01/12/2023

During the said period his/her work and conduct was
satisfactory he/she has been relieved / discharged from the
service from 01/12/2023


Principal
Ankita Daund institute of Nursing
Ambajogal Dist. Beed


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

SFCT/LION/30/2026

D :- 12/02/2026

Appointment Order

To,
Mahesh H. T. Jadhav.
Karad,.....
Maharashtra.
.....

Subject: Appointment on the post Tutor.....

Sir / Madam,

With reference to your application dated 16/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026..... for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Tutor.....

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, you are likely to be discontinued

2) You are appointed in the pay scale of Rs. 30,000/- With starting pay of Rs. 30,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.

3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,



Principal

Lifeline Institute of Nursing
President / Secretary
Pandharpur, Dist. Solapur
Principal, Dean or Director

(Any one competent authority to sign the appointment order)



Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556082

9 DEC 2025
उपकायपगार अधिकारी, पंढरपूर

पंढरपूर विक्री नं. ४१०० तारीख २२/०६

श्री. _____

रा. _____

चा मागितलेवस्तु रु. _____

चा भारतीय रुपये _____ चे जनरल स्टॅप दिले.

५००
२१
०१२

21/06/26

प्रफुल्ल पा. नारकर स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. ४/३/१९९३
कोड नंबर २५०९००९

Format of Bond of Service

I, Mr/Mrs....Mahesh...Tajinder...Tadhar... age 30 years,
permanent resident of At. Post. atake...Tal. Karad Dist. Satara... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

D) That, I am appointed temporarily as fulltime Tutor.....

At Siddhanath Foundation Charitable Trust, Lifeline Institute of Nursing Pandharpur, vide appointment order No. SFCJ/110N/30/2026 dated 12/02/2026. in the pay scale / consolidated pay as..... 30,000/-

II) That, I was joined / am joining on the said post from... Nursing (12/02/2026) subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028. and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs. Mahesh Tulinder Tadhar..... am signing

This document on this 12th Day of Feb 2026. At Pandharpur.

Date: 12/02/2026

Signature

Place: Pandharpur

Mahesh Tadhar
(Name)

1) Signature of Witness.....

Name and Address of Witness..... Subesh Ghule.....

2) Signature of Witness.....

Name and Address of Witness..... Om Yalgunde.....

Acceptance of the Appointment

Dr. _____

From : Mahesh J. Jadhav
at post. atake. Tal. Karwad.
(Full resi. Add) dist. Solapur.
Date : 12/02/2026

To,
Principal
Lifeline Institute of Nursing.

Subject : Acceptance of the Appointment**Reference : Your appointment order No. SFCT/LION/30/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on SFCT/LION/30/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

(M. Jadhav)

Appendix - VI

Joining Report

Dr. _____

From : Mahesh J. Jadhav
at post. atake. Tal. Karwad.
dist. Solapur.
(Full resi. Add)
Date : 12/02/2026

To,
Principal
Lifeline Institute of Nursing

Subject : Joining Report**Reference : Your appointment order No. SFCT/LION/30/2026 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on SFCT/LION/30/2026 I am accepting the same and joining to the post of Tutor in the subject of Nursing w.e.f. (before noon / afternoon).

Yours faithfully,

(M. Jadhav)

Allow to join

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.
(Please provide Copy to the concerned employee.)

Chopode
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Mr. Mahesh T. Jadhav.Resident of (Permanent home Address) at post. atake, Tal. Karad
dist. Solapur.Presently residing at (Present home Address) at. post. atake Tal. Karad
dist. Solapur.

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Nursing at Lifeline institute of Nursing
(Name of the college)

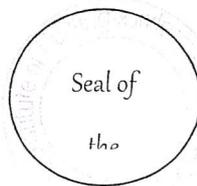
2. My working hours at the College are from 9:00 Am to 5:00 pm

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

4. Practicing / not practicing not practicing

5. If practicing, the place of practice is -

6. My practicing hours are from - to -

Whether allowed by the Management / College : Yes / No
(If yes, attach copy of the letter.)Date : 12/02/2026Signature M. JadhavPlace : Pandharpur.Name : Mahesh T. Jadhav.Designation : Tutor.Date : 12/02/2026 Countersigned by Dean / Principal _____Place : Pandharpur.Name : Ganpriya Chopade.

(To be typed on Plain Paper)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

RESUME

Name: Mahesh Jalindar Jadhav

My qualification: Master of science (psychiatric speciality nursing)

Email id: maheshjadhav8481@gmail.com



PERSONAL DETAILS:

Name: Mahesh Jalindar Jadhav.

Gender: Male

Marital status: unmarried

Date of birth: 11/9/1995

Address at post atake Tal karad dist satara

Hobbies: reading, swimming, cricket, walking

Language: Hindi, English, Marathi, kokani

Nationality: Indian

Educational details

Degree	Institution	Marks percentage
10 th std	Kolhapur division board	55.80 %
12 th std	Kolhapur division board	46 %
Gnm nursing	Nootan school of nursing Raigad	57%
Pbbsc nursing	Krishna Vishva Vidyapeeth	62 %
MSc nursing	Krishna Vishva Vidyapeeth	57 %

STRENGTH:

Good interpersonal skill and ability and work innovatively.

Ability to adapt new environment

Computer skill

Positive attitude

Good management skill / techniques


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Punctuality, hard working

EXPIERIENCE

**2 . 3 years of clinical experience in private hospital karad And
Genesis institute of nursing radhanagari - 5 month teaching experience.**

**DECALARATION: I do hereby declare that the above furnished information is
authentic to the best of my knowledge.**

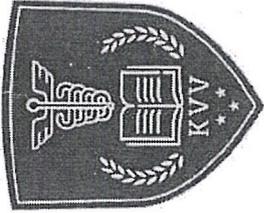
PLACE:

Date:

SIGNATURE :

A handwritten signature in blue ink, appearing to read 'M. S. Chavade', written over a horizontal line.A handwritten signature in blue ink, appearing to read 'Chavade', written over a horizontal line.
Principal

**Lifeline Institute of Nursing
Pandharpur, Dist. Solapur**



**KRISHNA
VISHWA
VIDYAPEETH**
(Deemed to be University)
Knowledge • Innovation • Excellence

PASSING CERTIFICATE

Statement No. 11

P. R. No. MN2021004

College Code. 104

Seat No. 48110

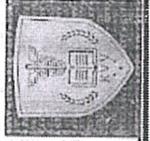
This is to certify that Shri. / Smt.

Jadhav Mahesh Jalindar

Appeared and Passed the *M. Sc. Nursing (Mental Health Nursing)*
Examination held by the Krishna Vishwa Vidyapeeth (Deemed to be University)", Karad.

In the month of **September 2024**.

Date : 01/10/2024



(Signature)

Controller of Examinations,
KVV(DU), Karad

Chopra
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



**KRISHNA
VISHWA
VIDYAPEETH**

(Deemed to be University)

Knowledge • Innovation • Excellence

We, the Chancellor, the Vice-Chancellor, the Members of the Executive Council and Academic Council of Krishna Vishwa Vidyapeeth (Deemed to be University), Karad award this degree to

Mr/Ms Jadhav Mahesh Jalindar

in recognition of successful completion of the

**Master of Science
(Mental Health Nursing)**

in September 2024

in testimony whereof is set the seal of the said University



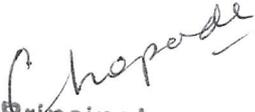
PRN : MN 2021004
03rd June, 2025

Vice Chancellor

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Renewal Slip[Rule 79(2)]		
Renewal No.	20170427569	
Registration No.	XLVI-4636	
Receipt No & Date	532586	26/02/2022
This is to Certify that the Registration of	Mr. Mahesh Jalindar Jadhav	
is Renewed upto	30/03/2027	
<div style="text-align: right;">   Registrar </div>		
Note: Please attach this slip on the back side of your registration certificate		


Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur


Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

◆ GENERAL NURSING AND MIDWIFERY ◆

Outward No - GEN/5B/24-25/ANM/347/31/07

Date - 31/07/2025

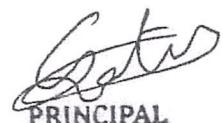
Experience and Relieving Letter

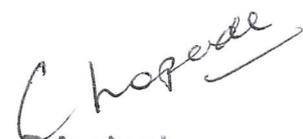


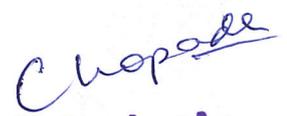
This is to certify that Mr. Mahesh J. Jadhav was working with our institute from 03 March 2025 to 31 July 2025.

Mr. Mahesh J. Jadhav had tendered her resignation intimation notice on 01/05/2025.

As per her desire, her resignation has been accepted and she is relieved from his duties on the date 31/07/2025 after office hours from 5.30 pm.


PRINCIPAL
Genesis Institute of Nursing
Radhanagari


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



**KARAD
HOSPITAL**
KARAD MULTISPECIALITY
HOSPITAL & RESEARCH
CENTRE PVT. LTD.

KARAD HOSPITAL

Karad Multispeciality Hospital & Research Centre Pvt. Ltd.

Ref. No. kmshrc/120/19.20. Date: 21/05/2019.

To whomsoever it may concern

This is to certify that Mr. Mahesh Jadhav working as a Staff Brother in our organization at Karad Hospital as a contractual Staff Since 12.09.2018 To 05.05.2019 as per our employment record.

He has performed his duties well as a Staff brother. He has good organizational system knowledge as well.

He bears a good moral character deemed fit in hospital . The certificate is giving his for future endeavors.

This certificate is issued in reply to his application dated 13.05.2019

Date: 21 /05 /2019

Place: KARAD

ADMINISTRATOR

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र राज्य माध्यमिक व उच्च माध्यमिक शिक्षण मंडळ, पुणे
Maharashtra State Board Of
Secondary and Higher Secondary Education, Pune
माध्यमिक शालान्त प्रमाणपत्र
SECONDARY SCHOOL CERTIFICATE

असे प्रमाणित करण्यात येते की / This is to certify that

Jadhav Mahesh Jalindar

आईचे नांव / Mother's Name **Shakuntala**

विभागीय मंडळ Divisional Board	आसन क्रमांक Seat No.	केन्द्र क्रमांक Centre No.	शाळा क्रमांक School No.	प्रमाणपत्राचा अनुक्रमांक Sr. No. of Certificate
KOLHAPUR	F011371	0306	21.02.041	005801

माध्यमिक शालान्त प्रमाणपत्र परीक्षा

has passed the SECONDARY SCHOOL CERTIFICATE EXAMINATION MARCH-2011

श्रेणीमध्ये खाली दर्शविलेले विषय घेऊन उत्तीर्ण झाला/झाली आहे.

In Grade **SECOND** with subjects shown below.

मुख्य विषय Main Subjects	कमाल गुण Max. Marks	प्राप्त गुण Marks Obtained	श्रेणीचे विषय Subjects of Grade	श्रेणी Grade
MARATHI (1ST LANG)	100	062	(WORK EXP./PRE-VOC.)	
HINDI (2/3 LANG)	100	060	COOKERY	A
ENGLISH (2/3 LANG)	100	036	(SCHOOL SUBJECTS)	
MATHEMATICS	150	060	HEALTH & PHYSICAL EDUCATION	A
SCIENCE & TECHNOLOGY	100	058	VOCATIONAL GUIDANCE	A
SOCIAL SCIENCES	100	063	PERSONALITY DEVELOPMENT	A
			ENVIRONMENT EDUCATION	A
एकूण गुण/Total Marks	500	279	PERCENTAGE £ 55.80	
एकूण प्राप्त गुण (अक्षरी)/ Total Marks Obtained (In Words)	TWO HUNDRED AND SEVENTYNINE			
जन्म दिनांक / Date of Birth	11/09/1995 (ELEVENTH SEPTEMBER NINETEEN NINETY FIVE)			

CS115005801

2510889127926

PUNE
17TH JUNE 2011



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

SFCT/LION/25/2026

D:-12/02/2026

Appointment Order

To,

Milind P. Jadhav.
Wadga. Bahroba, Nevasa
Ahmadnagar.

Subject: Appointment on the post Tutor

Sir / Madam,

With reference to your application dated 17/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of Tutor.

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, you are likely to be discontinued

2) You are appointed in the pay scale of Rs. 22,000/-. With starting pay of Rs. 22,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.

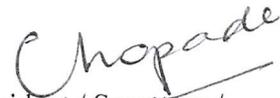
3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,



President / Secretary /
Principal, Dean or Director
Lifeline Institute of Nursing
(Any of the above mentioned posts to sign the appointment order)
Pandharpur, Dist. Solapur



Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556093

9 DEC 2025
प्रजासत्ताकार अधिकारी, पंढरपूर

पंढरपूर विक्री नं. 2400 ता. 2/12/2025

श्री. _____ 2/12/2025

रा. _____ 2400

चा मागितले घटक हा रु. 2400

चा भारतीय रुपये 2400 चे जनरल स्टॅप दिले.

Handwritten signature

प्रकृत पां. कार्यालय व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परकना नं. दि. 8/3/1993
कोड नंबर 2409009

Format of Bond of Service

I, Mr/Mrs....Milind...Prabhad...Jadhav..... age 26.. years,
permanent resident of A.P.:Wadala,bahar.,Nevasa..Dist..Ahmadn...do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

Acceptance of the Appointment

Dr _____

From : Mr. Milind. P. Jadhav
Wadala bahroba, Newera
Ahmadnagar
(Full resi. Add)Date : 12/02/2026

To,

Principal
Lifeline Institute of Nursing.**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/UON/25/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on SFCT/UON/25/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Milind.
Yours faithfully,

(Milind. Jadhav)Appendix - VIJoining Report

Dr _____

From : Mr. Milind. P. Jadhav
Wadala bahroba, Newera
Ahmadnagar
(Full resi. Add)

Date : _____

To,

Principal
Lifeline Institute of Nursing, Pandharpur.**Subject : Joining Report****Reference : Your appointment order No. SFCT/UON/25/2026 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on SFCT/UON/25/2026 I am accepting the same and joining to the post of Tutor in the subject of Nursing w.e.f. (before noon / afternoon).

Milind.
Yours faithfully,

(Milind Jadhav)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.
(Please provide Copy to the concerned employee.)

Milind Jadhav
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Mr. Milind Prabhakar Jadhav.Resident of (Permanent home Address) A/P. Wadala Bahroba,
Nevesa, Dist - Ahmadnagar.Presently residing at (Present home Address) A/P. Wadala Bahroba,
Nevesa, Dist - Ahmadnagar.

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Nursing at Lifeline Institute of Nursing.
(Name of the college)

2. My working hours at the College are from 9:00 am to 5:00 PM

3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.

4. Practicing / not practicing Not Practicing

5. If practicing, the place of practice is _____

6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes / No
(If yes, attach copy of the letter.)

Date : 12/02/2026

Signature _____

Place : PandharpurName : Mr. Milind. P. Jadhav.Designation : Tutor.Date : 12/02/2026

Countersigned by Dean / Principal _____

Place : Pandharpur.Name : Cumpriya. chopade.

(To be typed on Plain Paper)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

I) That, I am appointed temporarily as fulltimeTutor.....

At Siddhanath Foundation Charitable Trust, Lifeline Institute of Nursing Pandharpur, vide appointment order No. SFCT/UN/25/26 dated 12/02/2026 in the pay scale / consolidated pay as 22,000/-.....

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs...Milind...Prabhad...Jadhav, am signing

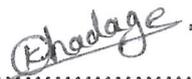
This document on this 12th..... Day of Feb. 2026 At Pandharpur.

Date: 12/02/2026


Signature

Place: Pandharpur

(Name)

1) Signature of Witness..........

Name and Address of Witness..MS..Kajal..J..Chhadage.....

2) Signature of Witness..........

Name and Address of Witness..ms..Tejasvini..B..Bamdagan.....


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

RESUME

Personal information:-

Name :- MILIND PRALHAD JADHAV
Contact no :- 7218430504
Email id :-milindpatil@gmail.com
Address :- nevsa ahmadngar
Date of birth :- 26/04/2000
Gender :- male
Marital status :- unmarried
Nationality :- india
Language Known :- English, Marathi, hindi
Hobbies :- reading books , writing books

Qualification

Sr no	Exam	Board	Yr of passing	Percentage
1	GNM	MNC	2021	61
2	PB BSC	MUHS	2023	64

Registered nurse :- XLVII-5369

Professional experience

Skills:-

- 1) Leadership
- 2) Vitals
- 3) Documentation
- 4) Communication skills

Declaration:-

I hereby declare that the above information is correct up to my knowledge I bear the responsibility for the correctness of particulars

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

DPU

Dr. D. Y. Patil Vidyapeeth, Pune

(Deemed to be University)

Pimpri, Pune - 411 018.



Passing Certificate

*This is to Certify that Shri / Smt. **Jadhav Milind Pralhad** has*

*appeared and passed the **Post Basic B. Sc. Nursing** Examination,*

*held by Dr. D. Y. Patil Vidyapeeth, Pimpri, Pune in the month of **July 2023***

PBN-IV-4027

210703028

02/08/2023



[Signature]
Controller of Examinations

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



24000017

DPU
Dr. D. Y. Patil Vidyapeeth
 Pune (India)
 (Deemed to be University)
 (Under Section 3 of the UGC Act, 1956)



*We, the Chancellor, the Pro-Chancellor, the Vice-Chancellor,
 the Pro Vice-Chancellor, the Members of the Executive Council and the
 Academic Council of Dr. D. Y. Patil Vidyapeeth, Pune certify that*

Jadhav Milind Pralhad

[Student of Dr. D.Y. Patil College of Nursing, Pimpri, Pune]

having been examined and found duly qualified

for the degree of

Post Basic Bachelor of Science
(Nursing)

and placed in the First Class

in July 2023.

*The said degree has been conferred on him at the
 Fifteenth Convocation held on Thirteenth April Two Thousand Twenty Four.*

In testimony whereof is set the seal of the said University.

Hawal

Vice Chancellor

PRN : 210703028



Patil

Chancellor
Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
 Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Renewal Slip [Rule 79(2)]

Renewal No. 20170369406

Registration No. XLVII-5369

Receipt No & Date 308304 19/01/2022

This is to Certify that the

Registration of MR. MILIND PRALHAD JADHAV

is Renewed upto 30/03/2027

Note: Please attach this slip on the back side of your registration certificate



Registrar

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

SIDDHANATH INSTITUTE OF NURSING (GNM)

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra

Affiliated to: Maharashtra University of Health Science

Mob. 9730402627

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 413304

EXPERIENCE CUM RELIVING CERTIFICATE

It is certified that, *milind prakash jadhav* had worked on ad-hoc / temporary / regular teacher in fulltime capacity **Siddhanath Institute Of Nursing College Pandharpur** as a Tutor

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		Form	To
01	Tutor	11/2/23	30/1/26

During the said period his / her work and conduct was satisfactory. He / she has been relived / discharged from the service from *30/01/26*

He / she bear good moral character. We wish him / her all the best for his / her future endeavours.

This certificate is given as per his / her request.

Date: *30/01/26*

Place: Pandharpur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Siddhanath Institute of Nursing (GNM)
Korti, Tal. Pandharpur, Dist. Solapur-413304

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 41330

SFCT/LION/39/2026

Date: 12/12/26

Appointment Order

To
..Poaja..Jarnik.
.....
..Amravati, Maharashtra.
.....

Subject: Appointment on the post ..Assi...Lecturer.

Sir / Madam,

With reference to your application dated 12/10/2026..in response to our Advt. dated 03/10/2026..and subsequent interview held on ..12/10/2026.....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of.....Assi...Lecturer.

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

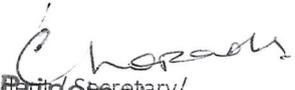
- 2) You are appointed in the pay scale of Rs..35,000/-. With starting pay of Rs...35,000/-. Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

13. Prior to this appointment, if you have been serving in any College / Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
14. Your appointment is subject to the approval from Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with our written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, "Deed of contract" in prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give our acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulate period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period.if will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,


President/Secretary/
Principal/Dean/Director
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
(any one competent authority to
sing the appointment order)


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556099

9 DEC 2025

पंढरपूर अधिकारी, पंढरपूर

पंढरपूर विक्री नं. २२१०० तारीख २२/१२/२०२५

श्री. _____ तारीख २२/१२/२०२५

रा. _____ तारीख २२/१२/२०२५

चा मागितलेयत्न हा रु. १००

चा भारतीय रुपये १०० चे जागरूक स्टॅंप दिले.

Handwritten signature

Sehat

प्रमुख पां. नगरकार स्टॅंप व्हंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परकना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs. Pooja Tamrik age 32 years,
permanent resident of Amravati, Maharashtra do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

I) That, I am appointed temporarily as fulltime ... Assi. Lecturer ...
At Siddhanath Foundation Charitable Trust, **Lifeline Institute of Nursing Pandharpur**, vide
appointment order No. SFLT/110N/39/2026 dated 12/02/2026 in the pay scale /
consolidated pay as 35,000/-.

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the
approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years
commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave
the service during the said period of two academic years / during the mid- term except in
the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local
Self Government College / Institute / Department.
- b) If I will be selected and appointed on the higher post in any other
College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services
of the College / Institute under any other circumstances, then I will not be eligible to get the
teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/
physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will
not claim continuity in service / deemed confirmation in the services. In the witness that
what has been stated above I Mr/Mrs. Pooja Tamnik am signing

This document on this 12th Day of Feb. 2026. At Pandharpur.

Pooja

Date: 12/02/2026

Signature

Place: Pandharpur

Pooja Tamnik
(Name)

1) Signature of Witness [Signature]
Name and Address of Witness Om Yalgunde

2) Signature of Witness [Signature]
Name and Address of Witness Rohan Pansande

Acceptance of the Appointment

Dr _____

From: Pooja Jamnik
Amravati,

(Full resi. Add)

Date: 12/02/2026

To,

Principal,
Lifeline Institute of Nursing**Subject : Acceptance of the Appointment****Reference : Your appointment order No.**

SFCT/LSON/39/2026

dated 12/02/2026

Sir/Madam,

I have received the above cited appointment order on 12/02/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Pooja
Yours faithfully,

(Pooja Jamnik)

Appendix - VIJoining Report

Dr _____

From: Pooja Jamnik.
Amravati.

(Full resi. Add)

Date: 12/02/2026

To,

Principal
Lifeline Institute**Subject : Joining Report****Reference : Your appointment order No.**

SFCT/LSON/39/2026

dated 12/02/2026

Sir/Madam,

I have receive the above cited appointment order on 12/02/2026 I am accepting the same and joining to the post of Lecturer. in the subject of Community Health Ng w.e.f. (before noon / afternoon).

Pooja
Yours faithfully,

(Pooja Jamnik)

Allowed to join

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)

Pooja
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHER

I, Dr./Vd. Pooja Tamnik.
 Resident of (Permanent home Address) Amravati, Maharashtra

Presently residing at (Present home Address) _____

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Community health at Lifeline institute of Nursing.
 (Name of the college)

2. My working hours at the College are from 9:00Am to 5:00pm.
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing not practicing.
5. If practicing, the place of practice is _____
6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes / No
 (If yes, attach copy of the letter.)

Date : 12/02/2026

Signature Pooja

Place : Pandharpur

Name : Pooja Tamnik

Designation : Asst. Lecturer.

Date : 12/02/2026

Countersigned by Dean / Principal _____

Place : Pandharpur.

Name : Ginpriya chopade



(To be typed on Plain Paper)

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur

Chopade
Principal
 Lifeline Institute of Nursing
 Pandharpur, Dist. Solapur



Maharashtra Nursing Council Mumbai

0000023495

A.Q.No. 16168

Date:05/10/2023

CERTIFICATE OF ADDITIONAL QUALIFICATION

This is to certify that

MS. POOJA HARISHCHANDRA JAMNIK

of

RATNADIP COLONY ARJUN NAGAR ROAD NEAR JYOTI CREATION AMRAVATI, AMRAVATI,
MAHARASHTRA 444604

bearing Registration No.: II-24036

dated: 27/02/2017

Midwife No.: XVI-20823

dated: 27/02/2017

is trained at

S.T.E.S. SINHGAD COLLEGE OF NURSING, NARHE, PUNE

and have successfully passed the examination of

M. Sc. (Community Health Nursing)

held by

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK, INDIA

in

November 2020

This additional qualification is recorded in the register of Council on

27/09/2023

Receipt No: 540964 19/12/2022



CD-126219



REGISTRAR

MAHARASHTRA NURSING COUNCIL, MUMBAI

Principal

**Lifeline Institute of Nursing
Pandharpur, Dist. Solapur**

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Maharashtra Nursing Council, Mumbai

Certificate of Registration

Registration No. II - 24036

This is to certify that

Miss. JAMNIK POOJA HARISHCHANDRA

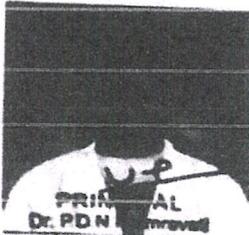
Having passed the examination of B. Sc. Nursing
has been duly registered under the Maharashtra Nurses Act, 1966
(Mah. N. Act of 1966), in part IV of the Register for Nagpur
Region in Section II as a registered NURSE

In witness whereof are herewith affixed the seal of the Maharashtra
Nursing Council, Mumbai, and the signature
of the President & Registrar.

Subject to the provisions of the said Act, this certificate is

Valid Upto: 30/03/2022

Dated the : 27th February 2017



[Signature]
Registrar

[Signature]
President

[Signature]
Principal

Lifeline Institute of Nursing
Pandharpur Dist. Solapur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

2020207281



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मास्टर ऑफ सायन्स (कम्युनिटी हेल्थ नर्सिंग)

ही पदवी उन्हाळी-२०२० मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
नऱ्हे, पुणे येथील एसटीईएसचे सिंहगड कॉलेज ऑफ नर्सिंग चे/च्या

जामनिक पुजा हरिश्चंद्र

यांना

२९ जानेवारी २०२१ च्या दीक्षांत समारंभात प्रदान करित आहोत

We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Master of Science (Community Health Nursing)

on

Jamnik Pooja Harishchandra

(PRN 2619122815)

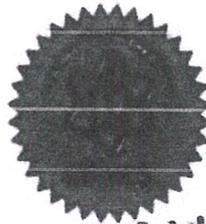
of

STES's Sinhgad College of Nursing, Narhe, Pune

for the examination held in Summer-2020
at the Convocation held on 29th January 2021



20F35902920



(Signature)

VICE-CHANCELLOR
कुलगुरु

(Signature)
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK



P. R. No. : 0512192680

Seat No. : 88263
COLLEGE CODE : 1506003

No. 1448630

PASSING CERTIFICATE

This is to certify that Smt.

JANNIK POOJA HARISHCHANDRA

appeared for and passed the

FINAL BASIC B.S.C. (NURSING)

Examination held by the Maharashtra University of Health Sciences, Nashik

in **SUMMER-2016**

Nashik

Date : **09 September 2016**


Controller of Examinations

Report the discrepancy of Name, Year etc. (if any) in above Certificate to the University within Six months of issue of certificate.

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

P. R. No. : 2619122615

Seat No. : 13387

COLLEGE CODE : 6222084

No. 20008093

PASSING CERTIFICATE

This is to certify that Shri/Smt.

JAMNIK POOJA HARISHCHANDRA

appeared for and passed the

FINAL M.Sc. (Nursing) COMMUNITY HEALTH NURSING

Examination held by the Maharashtra University of Health Sciences, Nashik

in SUMMER-2020

Nashik

Date : 25 November 2020

[Signature]
Controller of Examinations

Report the discrepancy of Name Year etc. (if any) in above Certificate to the University within Six months of issue of certificate

[Signature]
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



2016204633



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India
(ISO 9001:2008)

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मुलभूत विज्ञान स्नातक (परिचर्या)

ही पदवी उन्हाळी-२०१६ मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
अमरावती येथील डॉ. पंजाबराव देशमुख नर्सिंग इन्स्टिट्यूट चे/च्या

जामनीक पुजा हरिश्चंद्र

यांना

२० डिसेंबर २०१६ च्या दीक्षांत समारंभात प्रदान करित आहोत

**We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Basic Bachelor of Science (Nursing)**

on
Jamnik Pooja Harishchandra

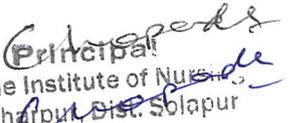
(PRN 0512192680)

of
Dr.Panjabrao Deshmukh Nursing Institute, Amravati

for the examination held in Summer-2016
at the Convocation held on 20th December 2016




VICE-CHANCELLOR
कुलगुरु

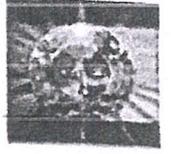

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Committed to developing "Conscientious, Confident & Caring quality nursing professionals"
MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S

Smt. Bakul Tambat Institute of Nursing Education

(Affiliated to MSBNPE, MNC, MUHS & INC, NAAC Accredited)

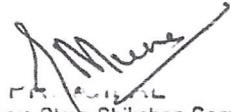


Ref.No.657A/INE/2024

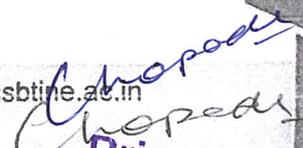
Date: - 01/06/2024

Experience Certificate

This is to certify that Ms. Pooja Jamnik was working with us from 1st April 2022 to 31st May 2024 as 'Clinical Instructor'. During this period her character and conduct was good.


Principal
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

Karvenagar, Pune - 411 052. ☎ (020) 25475020, 25477557 Website : www.mksssbtine.ac.in
E-mail : btine03@gmail.com / btine@maharshikarve.org


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



D. E. SOCIETY'S

Smt. Subhadra K. Jindal College of Nursing

Fergusson College Campus, Shivajinagar Pune - 411 004

● Ph.: (020) 67656480 / 81 / 70 / 68 ● Fax : 67656478 / 67656120

● Email : office.skjcn@despune.org

● Website : www.desnursingcollege.edu.in

Approved by Govt. of Maharashtra, Indian Nursing Council & Maharashtra Nursing Council
and Affiliated to Maharashtra University of Health Sciences, Nashik

Ref.No.: 431/2022/23

Date: 10/10/2022

Relieving Order

This is to certify that Ms Pooja Harishchandra Jamnik was employed as Clinical Instructor w.e.f. 01/03/2021 to 10/02/2022 at D.E. Society's Smt. Subhadra K. Jindal College of Nursing, Pune.

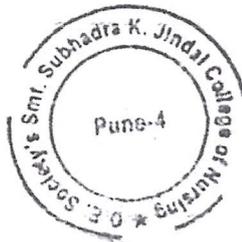
On her request, she was relieved from her duties on 10/02/2022 after office hours.

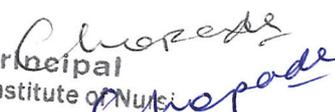
(Mrs. Rosamma Basil)

Principal,

D.E. Society's

Smt. Subhadra K. Jindal College of Nursing, Pune




Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



D. E. SOCIETY'S

Smt. Subhadra K. Jindal College of Nursing

Fergusson College Campus, Shivajinagar Pune - 411 004

• Ph.: (020) 67656480 / 81 / 70 / 68 • Fax : 67656478 / 67656120

• Email : office.skjcn@despune.org

• Website : www.desnursingcollege.edu.in

Approved by Govt. of Maharashtra, Indian Nursing Council & Maharashtra Nursing Council
and Affiliated to Maharashtra University of Health Sciences, Nashik

Ref.No.: 430/2022-23

Date: 10/10/2022

Experience Certificate

This is to certify that Ms. Pooja Harishchandra Jamnik, has been employed as Clinical Instructor/ Tutor at D.E. Society's Smt. Subhadra K. Jindal College of Nursing, Pune w.e.f 01/03/2021 to 10/02/2022. (she has availed a total of 75 days leave without pay)

Mrs. Rosamma Basil

Principal

DES Smt. Subhadra K Jindal College of Nursing, Pune



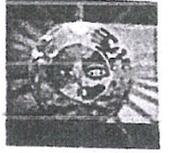
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



Committed to developing "Conscientious, Confident & Caring quality nursing professionals"
MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S

Smt. Bakul Tambat Institute of Nursing Education

(Affiliated to MSBNPE, MNC, MUHS & INC, NAAC Accredited)



Ref.No. 66-A/INE/2024

Date: - 01/06/2024

Relieving Order

This is to certify that Ms. Pooja Jamnik was working with us from 1st April 2022 to 31st May 2024 as 'Clinical Instructor'.

She has been relieved from the service w. e. f. 31.05.2024 after duty hours.

PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

Karvenagar, Pune - 411052. ☎ (020) 25475020, 25477557 Website: www.mksssbtine.ac.in

Email: btine03@gmail.com / btine@maharshikarve.org

Principal

Smt. Bakul Tambat Institute of Nursing
Education
Pandharpur, Dist. Solapur
Pandharpur, Dist. Solapur

Parwatabai Pundlikrao Tale Education Society, Mudholkar Peth, Amravati.
Public Charitable Trust - Reg. No. MH 422/2008/Dt. 19/07/2008

FLORENCE NIGHTINGALE NURSING SCHOOL

"Quality care through excellent Nursing Education"

(Affiliated to Maharashtra Nursing Council, Mumbai and Indian Nursing Council, New Delhi.)

Cell - 9011030855, 9011030860 ☎ (0721) 2591175.

Ref. No. FNMS/749/2018

Date : 31/8/18

EXPERIENCE CERTIFICATE

THIS IS TO CERTIFY THAT MISS POOJA

HARISHCHANDRA JAMNIK HAS WORKED IN OUR

INSTITUTION FROM 1/04/2017 TO 31/08/2018 AS A

TUTOR.

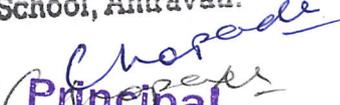
SHE IS VERY GOOD AT TEACHING AND AT HER

WORK.

WE WISH HER BEST LUCK FOR HER FUTURE

CARRIER.


Principal
Florence Nightingale
Nursing School, Amravati.


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



D. E. SOCIETY'S

Smt. Subhadra K. Jindal College of Nursing

Fergusson College Campus, Shivajinagar Pune - 411 004

• Ph.: (020) 67656480 / 81 / 70 / 68 • Fax : 67656478 / 67656120

• Email : office.skjcn@despune.org

• Website : www.desnursingcollege.edu.in

Approved by Govt. of Maharashtra, Indian Nursing Council & Maharashtra Nursing Council
and Affiliated to Maharashtra University of Health Sciences, Nashik

Ref.No.: 431/2022/23

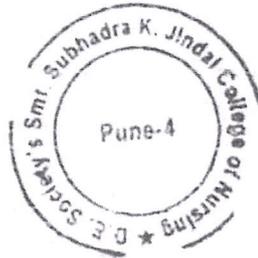
Date: 10/10/2022

Relieving Order

This is to certify that Ms Pooja Harishchandra Jamnik was employed as Clinical Instructor w.e.f. 01/03/2021 to 10/02/2022 at D.E. Society's Smt. Subhadra K. Jindal College of Nursing, Pune.

On her request, she was relieved from her duties on 10/02/2022 after office hours.

(Mrs. Basamma Basil)



Principal,

D.E. Society's

Smt. Subhadra K. Jindal College of Nursing, Pune

Principal

Lifeline Institute of Nursing

Pandharpur, Dist. Solapur

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

आयकर विभाग

INCOME TAX DEPARTMENT

POOJA JAMNIK

HARISHCHANDRA JAMNIK

09/05/1994

Permanent Account Number

BFFPJ1480Q

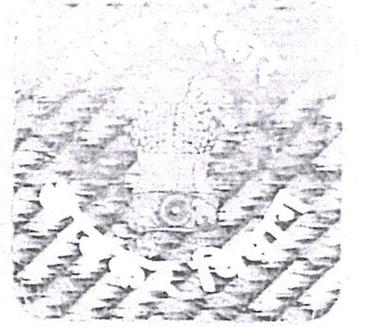
P. Jamnik

Signature



भारत सरकार

GOVT. OF INDIA



10082016

Chopada
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



भारत सरकार
Government of India



आधार



पूजा जामनिक
Pooja Jamnik
जन्म तिथि/DOB: 09/05/1994
महिला/ FEMALE

7588 5176 0264

VID : 9131 1557 7127 5360

मेरा आधार, मेरी पहचान

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

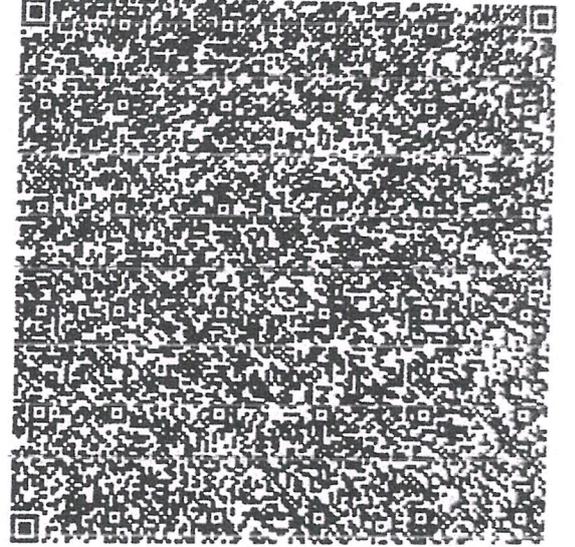


भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



प.स.प.
D/O: हरिशचंद्र जामनिक, शेगाव नका, रत्नदीप कॉलोनी,
अमरावती, अमरावती,
महाराष्ट्र - 444601



Address:
D/O: Harishchandra Jamnik, shegaov naka,
ratnadip colony, Amravati, Amravati,
Maharashtra - 444601

7588 5176 0264

VID : 9131 1557 7127 5360

☎ 1947

✉ help@uidai.gov.in

🌐 www.uidai.gov.in

Chopda
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur.

Appointment Order

To,

.....
Pooja. W. Rathod
A.P. Vantakli,
Bid.

Subject: Appointment on the post Tutor

Sir / Madam,

With reference to your application dated 16/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026 for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of..... Tutor

The Terms and Conditions of your appointment are as follows:

1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, your are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. 22,000/-... With starting pay of Rs. 22,000/-... Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,

Chopade
Principal
President / Secretary /
Principal, Dean or Director
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
(Any one competent authority to sign the appointment order)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA

2025

60AB 556091

9 DEC 2025
अधिकारी, पंढरपूर

पंढरपूर विक्री नं. 2400 तारीख 22/12/25
श्री. _____
रा. _____
चा मागितले प्रत्येक रु. 2000
चा भारतीय रुपये _____
चे जागरल स्टॅप दिले.

प्रफुल्ल पां. नगरकर स्टॅप व्हेंडर
तहसिल कार्यालयाच्या बाहेर, पंढरपूर
परवाना नं. दि. 8/3/1993
कोड नंबर 2409007

Format of Bond of Service

I, Mr/Mrs... Pooja... Waman... Rathod..... age 32. years,
permanent resident of A.P.-Vantakali, Beed... Maharashtra... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

I) That, I am appointed temporarily as fulltimeTutor.....

At Siddhanath Foundation Charitable Trust, Lifeline Institute of Nursing Pandharpur, vide appointment order No.SFCT/WON/22/2026 dated 12/02/2026 in the pay scale / consolidated pay as..22,000/-.....

II) That, I was joined / am joining on the said post from 12/02/2026 subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from 12/02/2026 to 12/02/2028 and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs...Pooja...Waman...Rathod..... am signing

This document on this..12th..... Day of Feb.2026 At Pandharpur.

Pooja.

Date: 12/02/2026

Signature

Place: Pandharpur

Pooja.w.Rathod.
(Name)

1) Signature of Witness.....
Name and Address of Witness...Sharukh Patel.....

2) Signature of Witness.....
Name and Address of Witness...Rohan Pansande.....

SFCT/LION/26/2026

D:-12/02/2026

Appointment Order

To,

.....
Mr. Dnyaneshwar R. Munde,
Chandamwadi,
Beed.....

Subject: Appointment on the postTutor.....

Sir / Madam,

With reference to your application dated 18/01/2026 in response to our Advt. dated 03/01/2026 and subsequent interview held on 12/02/2026.....for the above post, on the Recommendation of the Staff Selection committee, the Management is pleased to inform you that you are here by appointed on the post of.....Tutor.....

The Terms and Conditions of your appointment are as follows:

- 1) Your appointment is on probation for period of one year from the date of your joining. During the period of probation, your services are likely to be discontinued by the Management if your services are not found satisfactory by giving one months' notice on either side or one month's pay, in lieu of the notice period.

Or

Your Appointment is temporary for six months / one year from the date of your Joining. During the period of your temporary service, you are likely to be discontinued

- 2) You are appointed in the pay scale of Rs. ~~20,000/-~~ With starting pay of Rs. 20,000/- Per month in the time scale. After successful completion of the probation period of one year normally you will be entitled to annual increment subject to your satisfactory performance and conduct and a report thereof from concerned head of the Department. On successful completion of probation period of one year your services may be confirmed subject to your satisfactory performance and conduct.
- 3) Your appointment on probation shall be deemed to be confirmed after satisfactory completion of probation period and unless there is any adverse communication / order / order of extension of probation.

- 4) Your appointment is on Full time basis and your normal daily duty Hours shall be as decided or prescribed by the Competent Authority. However, the working hours shall be flexible depending upon the exigencies of services at the discretion of the Management.
- 5) Your appointment shall be terminated automatically, if it is proved that the information given by you in your application is false and / or a Degree or any other certificate or document submitted by you are forged or tampered with.
- 6) Your services shall be governed by the (a) provisions of the Maharashtra University of Health Sciences Act, 1998 and Statutes, Ordinances, Rules, Regulations and Directions framed under it, from time to time. (b) The Rules, Regulations, Instructions, Directives, Circulars received from Respective Central Councils, from time to time and (c) The prevailing Rules, Regulations and service conditions framed by the Management of the college and amended or altered, from time to time. And you will follow the code of conduct and Professional Ethics prescribed in University Direction No. 01/2017.
- 7) Your services shall be transferable to any College of the same Management which is affiliated to the Maharashtra University of Health Sciences, Nashik. However, you shall work in one College only, at a time.
- 8) Conducting private tuitions or private coaching classes in any form is strictly prohibited. You are also prohibited from taking any paid assignment or honorary posting outside the college without prior written permission of the Management.
- 9) Besides taking Lectures, Tutorials and Clinics/Practical's in the department you will be required to participate in the internal and external examination duties of the college and University and it is obligatory on your part to carry out any other responsibilities assigned by the University and college from time to time.
- 10) You are also required to undertake the responsibilities in the College / Hospital and any other medical activities which are conducted by the College in relation to the patient care, student care and that of academic nature, related to professional Pursuits, and also take part in Administrative task related to College and Hospital and shall have to strive to maintained dignity and standard of the college and Institute.
- 11) You will have to undergo the Medical Examination by the authorized Medical Officer or by the Civil Surgeon of the concerned district as per rules.
- 12) The Management can also seek the Antecedent Character Report from the police authority.

- 13) Prior to this appointment, if you have been serving in any College or Recognized Institution, you will be allowed to join only after submission of your resignation and relieving letter from the concerned College.
- 14) Your appointment is subject to the approval from the Maharashtra University of Health Sciences, Nashik. If your appointment for the said post is not approved by the University your services shall be terminated forthwith or if you so desire and the Management is agree to continue you on the unapproved post you will be allowed to continue in the service with your written consent. The terms and condition of such appointment shall be as decided by the Management and accepted by you. You are required to submit duly signed, Deed of Contract in a prescribed format.

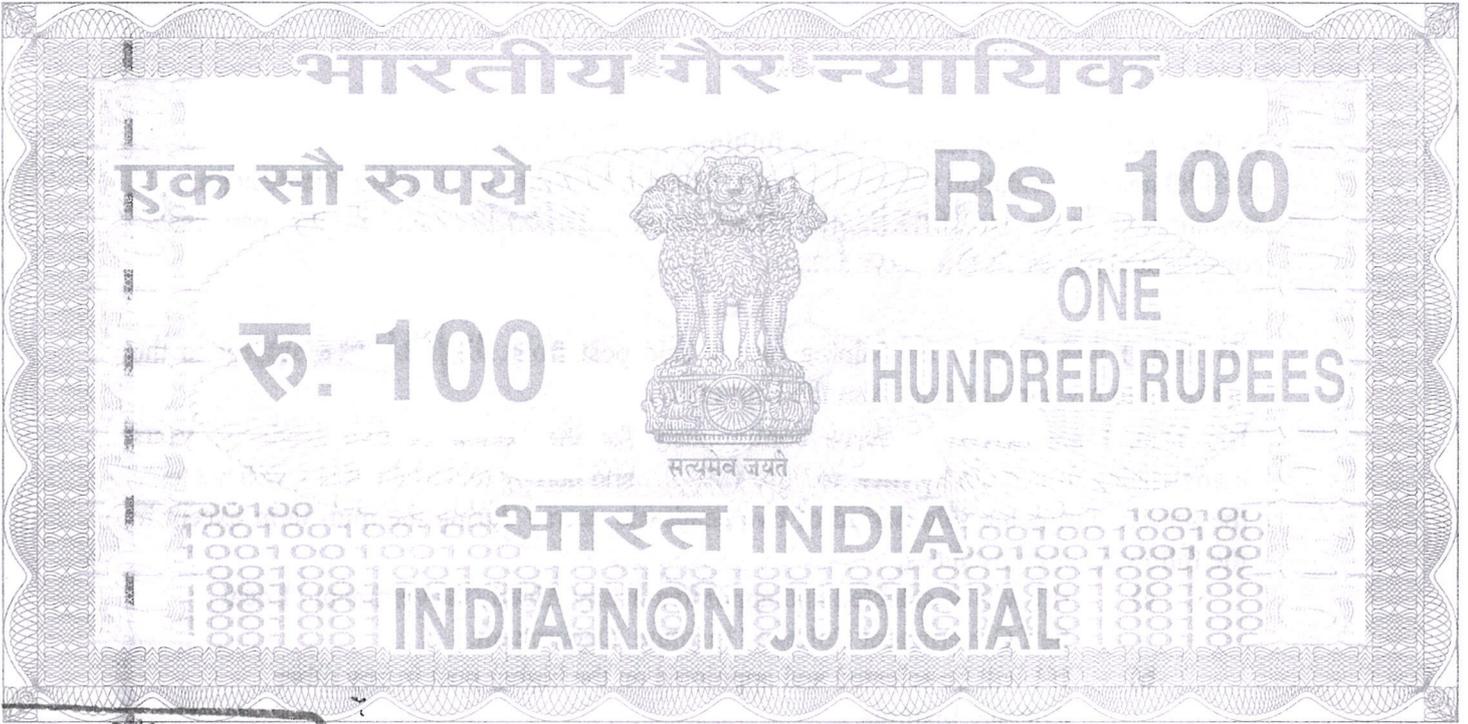
If you are voluntarily accepting the appointment with abovementioned terms and conditions, you are required to give your acceptance forthwith or within seven days from the date of receipt of this appointment order and join within a stipulated period not later than thirty days. If your acceptance is not received in time or you failed to join within stipulated period, it will be presumed that you are not interested to join the post and this order shall automatically stand cancelled, this may please be noted.

Yours faithfully,



Principal / Secretary /
Principal, Dean or Director
(Any one competent authority to sign the appointment order)


Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



महाराष्ट्र MAHARASHTRA
- 9 DEC 2025
उपस्थान अधिकारी, पंढरपूर

2025

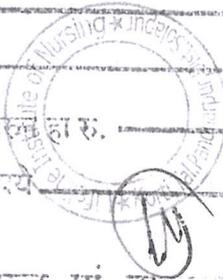
60AB 556088

पंढरपूर विक्री नं. २५०० तारीख २५/०९

श्री. _____
रा. _____

चा मागितले वस्तू हा रु. २५००

चा भारतीय रुपये _____ चे जनरल स्टॅप दिले.



प्रमुख पां. नगरपालिका स्टॅप व्हेंडर
तहसिल कार्यालयाच्या आहेर, पंढरपूर
परकना नं. दि. ४/३/१९९३
कोड नंबर २५०९०००

Format of Bond of Service

I, Mr/Mrs. P. N. Nimeshwaray. Ramkishan. Munde age २८ years,
permanent resident of Chandelamwadi, Beed..... do hereby
voluntarily giving this Bond of Service and consented / agreed to the following:-

Chopode
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

I) That, I am appointed temporarily as fulltimeTutor.....
At Siddhanath Foundation Charitable Trust, Lifeline Institute of Nursing Pandharpur, vide appointment order No.SF.C.T./11.07/26/2026 dated ...12/02/2026... in the pay scale / consolidated pay as..20,000/-...

II) That, I was joined / am joining on the said post from..12/02/2026 subject to the approval to my appointment from the University.

III) That, I am agreed to serve continuously for the period of two academic years commencing from.12/02/2026..to.12/02/2028...and hereby undertake that I Will not leave the service during the said period of two academic years / during the mid- term except in the following circumstances,

- a) If I will be selected and appointed in any Aided / Government / Local Self Government College / Institute /Department.
- b) If I will be selected and appointed on the higher post in any other College/ Institute.
- c) Any other genuine compassionate ground.

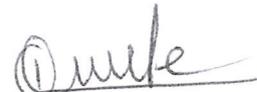
IV) That, I know that if during the said period of two academic years, if I leave the services of the College / Institute under any other circumstances, then I will not be eligible to get the teacher's approval from any other College / Institute for the remaining period of this bond.

V) That, I undertake to leave the College / Institute unconditionally, if I found medically/ physically unfit to continue in the service.

VI) That, I undertake that after completion of the said period of two academic years I will not claim continuity in service / deemed confirmation in the services. In the witness that what has been stated above I Mr/Mrs. Dnyeshwar.....munde..... am signing

This document on this..12th..... Day of feb.2026. At. Pandharpur -

Date: 12/02/2026


Signature

Place: Pandharpur.

Dnyeshwar Munde
(Name)

1) Signature of Witness..........
Name and Address of Witness.....Suresh...D. Ghule.....

2) Signature of Witness..........
Name and Address of Witness.....Rohan Pansande.....

Acceptance of the Appointment

Dr _____

From : Mr. Dnyaneshwar. Munde
Chandamwadi, Beed.

(Full resi. Add)

Date : 12/02/26

To,

Principal,Lifeline Institute of Nursing, Pandharpur.**Subject : Acceptance of the Appointment****Reference : Your appointment order No. SFCT/UNW/26/2026 dated 12/02/2026**

Sir/Madam,

I have received the above cited appointment order on SFCT/UNW/26/2026 and here by declares that I am accepting the same. I shall join as early as possible or as soon as I have been relieved from my present employer.

Yours faithfully,

(Dnyaneshwar munde)

Appendix - VIJoining Report

Dr _____

From : Mr. Dnyaneshwar.
munde.
Chandamwadi, Beed.

(Full resi. Add)

Date : _____

To,

Principal,Lifeline Institute of Nursing**Subject : Joining Report****Reference : Your appointment order No. SFCT/UNW/26/2026 dated 12/02/2026**

Sir/Madam,

I have receive the above cited appointment order on SFCT/UNW/26/2026 I am accepting the same and joining to the post of Tutor in the subject of Nursing w.e.f. (before noon / afternoon).

Allowed to join

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Yours faithfully,

(Dnyaneshwar munde)

Note : The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

(Please provide Copy to the concerned employee.)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

UNDERTAKING OF TEACHERI, Dr./Vd. Mr. Dnyaneshwar. R. munde,Resident of (Permanent home Address) AIP- Chandamwadi, Beed.Presently residing at (Present home Address) AIP- Chandamwadi, Beed.

Do hereby giving an undertaking that -

1. I have been selected as per prescribed procedure of selection and working as full time Director / Dean/ Principal/ Professor/ Asso.Professor/ Reader / Asst. Prof./Lecturer/ Asst. Lecturer/ Tutor/ Demonstrator

In Subject of Nursing at Lifeline Institute of Nursing.
(Name of the college)

2. My working hours at the College are from 9.00 AM to 5.00 PM
3. I hereby further declare that except the above said College, I am not employed in any other college in any capacity.
4. Practicing / not practicing Not practicing
5. If practicing, the place of practice is _____
6. My practicing hours are from _____ to _____

Whether allowed by the Management / College : Yes /No
(If yes, attach copy of the letter.)Date : 12/02/2026

Signature _____

Place : PandharpurName : Mr. Dnyaneshwar. R. munde,Designation : TutorDate : 12/02/2026

Countersigned by Dean / Principal _____

Place : Pandharpur.Name : Amprya chopade,

(To be typed on Plain Paper)

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



2021110098



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
Maharashtra University of Health Sciences, Nashik, India

आम्ही, कुलपती, प्रतिकुलपती, कुलगुरु
आणि व्यवस्थापन परिषद व विद्यापरिषदेचे सदस्य
मुलभुत विज्ञान स्नातक (परिचर्या)

ही पदवी हिवाळी-२०२० मधील परीक्षेत उत्तीर्ण झाल्याबद्दल
लातूर येथील महाराष्ट्र इन्स्टिट्यूट ऑफ नर्सिंग सायन्सेस चे/च्या

मुंडे ज्ञानेश्वर रामकिशन

यांना

२२ जून २०२१ च्या दीक्षांत समारंभात प्रदान करित आहोत

We, the Chancellor, Pro-Chancellor, Vice-Chancellor
and Members of the Management Council, Academic Council
confer the Degree of
Basic Bachelor of Science (Nursing)

on

Munde.Dnyaneshwar Ramkishan

(PRN 0517132121)

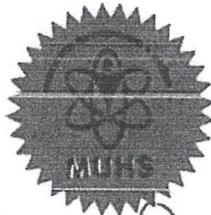
of

Maharashtra Institute of Nursing Sciences, Latur

for the examination held in Winter-2020
at the Convocation held on 22nd June 2021



20AO0035521



[Signature]

VICE-CHANCELLOR
कुलगुरु

[Signature]

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK



MUHS

P. R. No.: 0517132121

Seat No.: 10893

No. 21002582

COLLEGE CODE: 6403063

PASSING CERTIFICATE

This is to certify that Shri/Smt.

MUNDE DNYANESHWAR RAMKISHAN

appeared for and passed the

FINAL BASIC B.Sc. (NURSING)

Examination held by the Maharashtra University of Health Sciences, Nashik

in Winter-2020

Chopade

Principal
Lifeline Institute of Nursing
Panvel, Dist. Solapur

Chopade
Nashik

Principal
Lifeline Institute of Nursing
Panvel, Dist. Solapur

Date: 24 April 2021

Controller of Examinations

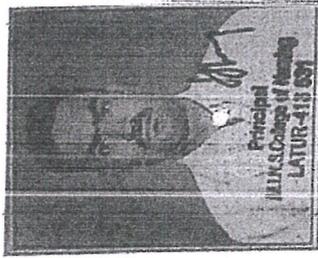
Report the discrepancy of Name, Year etc., (if any) in above Certificate to the University within Six months of issue of certificate.

2100012056



120949

Maharashtra Nursing Council Mumbai



Certificate of Registration

Registration No. XLVII- 6398

This is to certify that

MR. MUNDE DNYANESHWAR RAMKISHAN

Possessing the qualification of **B. SC. NURSING & MIDWIFERY** has been duly registered under the Maharashtra Nurses Act, 1966 (Mah.N.A of 1966), in part III of the Register for Marathwada Region in Section XLVII as a registered **MALE NURSE & MIDWIFE**

In witness whereof are herewith affixed the seal of the Maharashtra Nursing Council, Mumbai, and the signature of the President & Registrar.

Subject to the provisions of the said Act, this certificate is

Valid upto 30/03/2022

Dated the 08th July 2021

Registrar

President/Administrator

- 1) Renewal of Registration, Change of Name & Change of Address is responsibility of the holder of this Certificate.
- 2) This Registration Certificate is issued on the basis of previous Registration Certificate of
- 3) Addition/ Alteration/ Attestation or any infringement of this Instruction, on the front side of this Certificate will result in the cancellation.

dam

CD-87048



Chopade
Principal
Lifeline Institute of Nursing,
Pandharpur, Dist. Solapur



Chopade
Principal
Lifeline Institute of Nursing,
Pandharpur, Dist. Solapur

This is a scanned copy of a signed document. Download the mobile app from <http://seqr.cc.com/valent> for online verification and further details.



Renewal Slip[Rule 79(2)]		
Renewal No.	20170462736	
Registration No.	XLVII-6398	
Receipt No & Date	49094	23/03/2022
This is to Certify that the Registration of	Mr. Dnyaneshwar Ramkishan Munde	
is Renewed upto	30/03/2027	
		  Registrar
Note: Please attach this slip on the back side of your registration certificate		

Chopade

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Siddhanath Foundation Charitable Trust's

SIDDHANATH INSTITUTE OF NURSING (GNM)

Approved by: Indian Nursing Council | Maharashtra Nursing Council | Govt. of Maharashtra

Affiliated to: Maharashtra University of Health Science

Mob. 9730402627

Add. : Gat No. 671, 672/2/B, Near Sinhgad College, Karad Road, Korti, Tal. Pandharpur, Dist. Solapur 413304

EXPERIENCE CUM RELIVING CERTIFICATE

It is certified that, *Dnyaneshwar R. Munde* had worked on ad-hoc / temporary / regular teacher in fulltime capacity **Siddhanath Institute Of Nursing College Pandharpur** as a **Tutor**

His / her experience in the said College / Institute is as under:

Sr. No.	Post	Experience	
		Form	To
01	Tutor	<i>11/2/24</i>	<i>30/01/26</i>

During the said period his / her work and conduct was satisfactory. He / she has been relived / discharged from the service from *30/01/2026*

He / she bear good moral character. We wish him / her all the best for his / her future endeavours.

This certificate is given as per his / her request.

Date: *30/01/2026*

Place: Pandharpur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur
Siddhanath Institute of Nursing (GNM)
Korti, Tal. Pandharpur, Dist. Solapur-413304



1 2 8 6 2 5 0 4 2 0 3 0 0 8 3 5 8 3 3 3

Form B-2 (Amended)

RULE 5(5)(4)(IV)

Form of Caste Certificate to be issued Other Backward Classes, Vimukta Jati (A) Nomadic Tribes (B,C & D), Special Backward Class, Educationally and Socially Backward Class and Special Backward Class (A) and its synonyms belong to State of Maharashtra

Documents Verified

- 1 PARISHIT B FORM
- 2 Caste Certificate issued by the Local Competent Authority
- 3 FATHER ADHAR CARD
- 4 Income Certificate for the last 3 years issued by the Tahsildar
- 5 RESIDENT CERTIFICATE
- 6 Self Declaration
- 7 ADHAR CARD SON
- 8 School Leaving Certificate

SDO/Non Creamy VJNT Reg./Case No

Year: 2025 - 2026

Outward No : 42253520859

Dated: 20/04/2025

CASTE CERTIFICATE (PART-A)

This is to certify that **Kumar Munde Dnyaneshwar Ramkishan Son of Shri Munde Ramkishan Pandhari** of village **Chandanwadi**, taluka **Ambejogai**, district **Beed** of the State of Maharashtra belongs to the **Vanjari(30)** Tribe which is recognized as **Nomadic Tribes(D)** under the Government Resolution No **CBC-1291-222-Mvk-5** dated **23/03/1994** as amended from time to time.

Kumar Munde Dnyaneshwar Ramkishan and/or his family ordinarily reside(s) in village **Chandanwadi**, taluka **Ambejogai**, district **Beed** of the State of Maharashtra.

NON-CREAMY LAYER CERTIFICATE (PART-B)

This is to certify that **Kumar Munde Dnyaneshwar Ramkishan** does not belong to the persons/sections (Creamy-layer) mentioned in the Government of Maharashtra Gazette, Part IV-B, dated 29th January 2004, Maharashtra State Public Service Commission (Reservation for S.C./S.T./D.T.(V.J.)N.T., S.B.C. & O.B.C. Act, 2001 and instructions and guidelines laid down in the Government Resolution, Social Justice, Cultural Affairs, Sports and Special Assistance Department No. CBC-10/2001/Pra.Kra.120/Mavak-5, dated 1st November 2001, CBC-1094/Pra.Kra.86/Mavak-5, dated 16th June, 1994, CBC-1094/Pra.Kra.86/Mavak-5, dated 5th June, 1997 and Government Resolution No.CBC- 10/2001/Pra.Kra.111/Mavak-5, dated 29th May 2003 and Government Resolution No. VJNT-2014/C.R.118/VJNT-1, dated 31st July 2014

This Certificate is valid for the period upto 31-Mar- 2028 from the date Signature valid

Place : Ambejogai

Date : 29/04/2025

(With the seal of Office)

Digitally Signed by
Deepak Mchchhindra Wajale
Date:4/29/2025 6:25:27 PM

Sub Divisional Officer

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Solapur

Printed By -OMTID : VLE Name :SACHIN NARAYAN ANJAN, Date:29/04/2025 2:58PM

This is a digitally signed document, hence is legally valid as per the Information Technology (IT) Act, 2000.

Chopade
Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Documents Verified:-

- 1) Application & Affidavit of Applicant Dt. 25/04/2014
- 2) Taluka Caste Certificate of hatola Dt. 23/04/2014
- 3) T.C. of Z.P School Chandanwadi No.(137) Dt. 07/04/2014
- 4) Caste Certificate of Brother Issued by Sub Divisional Officer, Ambajogai Dt. 05/06/2009
- 5) Caste Validity Certificate of Brother Issued by Reserach Office Aurangabad Dt. 16/05/2013

Form of Certificate to be produced by Other Backward Classes, Nomadic Tribes (C) Dhangar and its synonyms and Nomadic Tribe (D) Vanjari and its synonyms

CASTE CERTIFICATE

This is to certify that Shri/Shrimati/Kumari Munde Dnyaneshwar Son/daughter/Wife of Ramkishan of Village Chandanwadi Taluka Ambajogai District/Division Beed in the Maharashtra State belong to the "Vanjari" NT-30 Caste/Community which is recognised as a Other Backward Class/ Nomadic Tribe (C) / Nomadic Tribe (D) under the Government resolution Social Welfare, Cultural Affairs and Sports Department No. CBC-1291-222-Mvk-5 Dt. 23-3-1994

Shri/Shrimati/Kumari Munde Dnyaneshwar Ramkishan and/or his/her family ordinarily reside(s) in the Village Chandanwadi Taluka Ambajogai District/Division Beed of the Maharashtra State.

This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) Mentioned in the Scheduled to the Government Resolution, Social Welfare, Cultural Affairs and Sports Department No. CBC.10/2001/PK-111/Mvk-5 Dated 29th May 2003.

No.2014 /Misc/Ws/ 628
Sub-Divisional Officer,
Ambajogai.
Date : 3/5/2014



[Signature]
Sub Divisional Officer
Ambajogai

Place : Ambajogai

If it is later on found that, the applicant has furnished incorrect or false information, this certificate is liable for cancellation.

5137

[Signature]
Principal
Lifeline Institute of Nursing,
Pandharpur, Dist. Solapur
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



सत्यमेव जयते

GOVERNMENT OF MAHARASHTRA
Social Justice and Special Assistance Department

CERTIFICATE OF VALIDITY

[Rules 17(6), 17(10) and 17(11)(tt)(a)]

No. A 1176356

CASTE CERTIFICATE SCRUTINY COMMITTEE Aurangabad Division, Committee No. 1, Aurangabad

Committee Decision No Education/Lot No. 2017/Sr.No.6 , dated 07.10.2015

WHEREAS, an application of Munde Dnyaneshwar Ramkishan dated 13/08/2015 along with the documents was received by the Scrutiny Committee for verification of Caste Certificate of Vanjari 30 (Nomadic Tribe) and the same was placed before the said Committee in the meeting held on 07.10.2015

AND WHEREAS in accordance with the powers conferred on it under Maharashtra Scheduled Caste, Scheduled Tribes, De-Notified Tribes (Vimukta Jatis), Nomadic Tribes, Other Backward Class and Special Backward Category (Regulation of Issuance and Verification of) Castes Certificate Act, 2000 (Mah. XXIII of 2001); Maharashtra Scheduled Castes, De-notified Tribes (Vimukta Jatis), Nomadic Tribes, Other Backward Class and Special Backward Category (Regulation of Issuance and Verification of) Caste Certificate Rules, 2012; the Committee on the basis of the documents and evidence produced before it verified and scrutinised the said Caste Certificate/Claim.

NOW, THEREFORE, the Committee hereby certifies that caste claim is found to be correct and the caste certificate bearing No 2014/Misc/Ws/628 dated 03/05/2014

issued by the Sub Divisional Officer Ambajogai District Beed

certifying that Munde Dnyaneshwar Ramkishan belongs to Vanjari 30 (Nomadic Tribe) Caste/Tribe is found to be VALID.



Chopade
Member Secretary & Research Officer
Caste Certificate Scrutiny Committee,

Aurangabad Division, Committee No.1, Aurangabad

Chopade
Principal

Lifeline Institute of Nursing
Pandharpur, Dist. Solapur



भारत सरकार
Government of India



ज्ञानेश्वर रामकिशन मुंडे
Dnyaneshwar Ramkishan Munde
जन्म तारीख/DOB: 31/12/1997
पुरुष/ MALE



7123 0283 1225

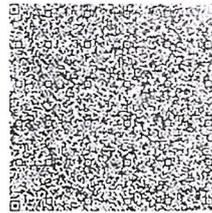
VID: 9103 0506 3217 1171

माझे आधार, माझी ओळख

एकमात्र विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता:
S/O रामकिशन मुंडे, चंदनवाडी, बीड,
महाराष्ट्र - 431519

Address:
S/O Ramkishan Munde, Chandanwadi,
Beed,
Maharashtra - 431519



Use with Photograph

7123 0283 1225

VID: 9103 0506 3217 1171



Chopode
Principal
Lifeline Institute of Nursing
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Chopode
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Pandharpur, Dist. Solapur

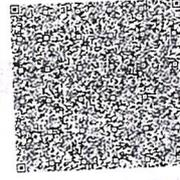
आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
FOVPM4485P



नाम / Name
DNYANESHWAR RAMKISHAN MUNDE

पिता का नाम / Father's Name
RAMKISHAN MUNDE

18072019

जन्म की तारीख /
Date of Birth
31/12/1997

हस्ताक्षर / Signature

इस कार्ड के खोने/पाने पर कृपया सूचित करें/लौटारें:

आयकर पैन सेवा इकाई, एन एस डी एल
बोधी मण्डल, भन्त्री स्टर्लिंग,
प्लॉट नं. 341, सर्वे नं. 997/8,
मॉडल कॉलोनी, दीप बंगला चौक के पास,
पुणे - 411 016.

*If this card is lost / someone's lost card is found,
please inform / return to :*

Income Tax PAN Services Unit, NSDL
4th Floor, Mantri Sterling,
Plot No. 341, Survey No. 997/8,
Model Colony, Near Deep Bungalow Chowk,
Pune - 411 016.

Tel: 91-20-2721 8080, Fax: 91-20-2721 8081
e-mail: tininfo@nsdl.co.in.

Principal
Lifeline Institute of Nursing
Pandharpur, Dist. Solapur

Principal
Lifeline Institute of Nursing
Pandharpur