ANNEXURE- III

Maharashtra University of Health Sciences, Nashik

Following documents need to available on web site

Trust Deed / Bylaws/ Registration Certificate (Trust / Hospital (Bombay Nursing Act))

Faculty. Nursing

Name of College/Institute. Ganpatrao Adke College of Nursing, Nashik

Name of Trust / Society		SUKHDEO MAHIPAT MOREY PATIL PRATISTHAN
Registration Certificate **To be uploaded on web site clear and original copy**		Trust / Society: - SUKHDEO MAHIPAT MOREY PATIL PRATISTHAN
		Trust Deed / Bylaws:- **F2900**
		Hospital Ownership Documents:- **Available**
		Hospital (Bombay Nursing Act) :- **214**
		MPCB Certificate of Parent Hospital :- **Available**
Hospital Type as Per Bombay Nursing Act :- **Super Specialty Hospital**		
Hospital (Bombay Nursing Act) issuing Authority :- **NASHIK MUNCIPAL CORPORSATION**		
Hospital Bed as per Certificate:-**100**		
Name of the College / Institute (As per First Affiliation letter)	:	SUKHDEO MAHIPAT MOREY PATIL PRATISTHAN GANPATRAO ADKE COLLEGE OF NURSING,NASHIK
Address	:	SUNFLOWER COMPUND,DWARKA CIRCLE NASHIK
Email ID	:	gacnursing@gmail.com
Telephone / Mobile No.(s)	:	0253-2994093/2502912/13 7722046228
Website	:	http://www.gainnashik.in
College Code	:	153116

Here by I declare all relevant document uploaded are clear and visible on web site & are true as per my best knowledge

Any Other, Please Specify:-

Date:-

Dean/ Principal Stamp & Signature

GANPATRAO ADKE COLLEGE OF NURSING
NASHIK

Chairman of LIC

Member Of LIC

Member Of LIC