

Maharashtra University of Health Sciences, Nashik
Physiotherapy Faculty
Inspection Committee Report for Academic
Year 2026-2027

Clinical Material in Hospital

Name of College/Institute: Nootan College of Physiotherapy

Name of the Parent/attached Hospital: -Mahankali Ayurvedic Hospital,

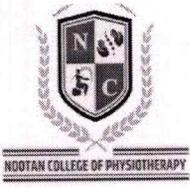
Kavathe Mahankal

Sr. No.	Particulars to be verified	Actual Available	Lacuna																																																																																											
a.	There must be a parent/attached Hospital with minimum 100 beds as per the Intake Capacity Indoor & Outdoor Facility with Physiotherapy exposure in the broad specialty areas including Intensive care to provide practical experience to the student.: (Refer Sr. No for Beds as per Intake Capacity)	Available																																																																																												
b.	The student to patient ratio should be minimum 1:5, the first part being Student & second part being patient.	Available																																																																																												
c.	The desirable breakup of beds shall be as follows: Student Patient Ratio (as per M.S.R., it must be 1:5):	Available																																																																																												
	<table border="1"> <thead> <tr> <th>Sr.No.</th> <th>Specialty</th> <th>10to30 Intake</th> <th>31to40 Intake</th> <th>41to50 Intake</th> <th>51to60 Intake</th> <th>For61to100 Intake</th> </tr> </thead> <tbody> <tr> <td>01</td> <td>General Medicine</td> <td>30</td> <td>40</td> <td>50</td> <td>60</td> <td>100</td> </tr> <tr> <td>02</td> <td>General Surgery</td> <td>30</td> <td>40</td> <td>50</td> <td>60</td> <td>100</td> </tr> <tr> <td>03</td> <td>Orthopedics</td> <td>30</td> <td>50</td> <td>50</td> <td>60</td> <td>100</td> </tr> <tr> <td>04</td> <td>Obst& Gynaec</td> <td>15</td> <td>20</td> <td>30</td> <td>30</td> <td>60</td> </tr> <tr> <td>05</td> <td>Pediatrics</td> <td>15</td> <td>20</td> <td>30</td> <td>30</td> <td>60</td> </tr> <tr> <td>06</td> <td>Medical ICU</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> <td>15</td> </tr> <tr> <td>07</td> <td>Surgical ICU</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> <td>15</td> </tr> <tr> <td>08</td> <td>PICU+NICU</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>15</td> </tr> <tr> <td>09</td> <td>ICCU+ RICU</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>15</td> </tr> <tr> <td>10</td> <td>Burns Unit/ICU</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> </tr> <tr> <td>11</td> <td>Emergency</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> </tr> <tr> <td></td> <td>Total</td> <td>150</td> <td>200</td> <td>250</td> <td>300</td> <td>500</td> </tr> </tbody> </table>	Sr.No.	Specialty	10to30 Intake	31to40 Intake	41to50 Intake	51to60 Intake	For61to100 Intake	01	General Medicine	30	40	50	60	100	02	General Surgery	30	40	50	60	100	03	Orthopedics	30	50	50	60	100	04	Obst& Gynaec	15	20	30	30	60	05	Pediatrics	15	20	30	30	60	06	Medical ICU	05	05	10	10	15	07	Surgical ICU	05	05	10	10	15	08	PICU+NICU	05	05	05	10	15	09	ICCU+ RICU	05	05	05	10	15	10	Burns Unit/ICU	05	05	05	10	10	11	Emergency	05	05	05	10	10		Total	150	200	250	300	500		
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d.	Student: Bed Ratio (Undergraduate): 1:5 Yes	Available																																																																																												
e.	Average Bed Occupancy in%: 85%	Available																																																																																												
f.	Whether separate Registration room is available at OPD? Yes f. Number of total patients registered in last Year: 3285 g. Number of New Patients registered on daily average: 09 h. Number of Old patients registered on daily average: 05 i. Average Number of patients attending OPD (current year): 270 j. Whether records of patient registration are well maintained: Yes	Available																																																																																												
g.	Indoor Physiotherapy Department Areas as per Clinical Load and Intake: (as per M.S.R.) Clinical Load, Total Strength of Hospital Beds, Outdoor Physiotherapy Load per specialty, Indoor Physiotherapy Load per Specialty, Student: Patient ratio per specialty.	Available																																																																																												

h.	OutdoorPhysiotherapyDepartmentAreasasperClinicalLoadandIntake:(asperM.S.R.)	Available	
I	Physiotherapy OPD Services (as per M.S.R.): The hospital shall have functional physiotherapy department providing services on outpatient& in patient department at least since 12Months prior application &shall maintain required OPD and IPD Records for verification.	Available	
	<ul style="list-style-type: none"> • As per Central Council Norms/University Norms, above Infrastructure must be available at college. • If Infrastructure is available, then mark Adequate” &do not attach any documents. • In case of “Inadequate”, it must be mark as “Inadequate” with evidence. • If attached Hospitals provide valid MOU 		


 Dean/Principal Stamp & Signature
PRINCIPAL
Nootan College of Physiotherapy,
Narsinghron (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

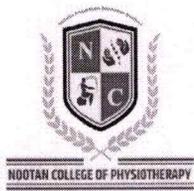
Verified by The LIC Committee Members



List of Attached Hospitals of Physiotherapy

Sr.No.	Name of Hospital	Bed Strength	Distance of Hospital from College
1	Mahankali Ayurvedic Hospital & Research Center	100	-
2	Mahalaxmi Multispecialty Hospital	50	4
3	Samarth Neuro & Super Speciality Hospital	100	30
4	Shriratna Hospital	100	30
5	New Life ICU & Multi Specialty Hospital	50	30
6	Noble Hospital	50	30
Total		450	


PRINCIPAL
Nootan College of Physiotherapy
Narsinghaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra



List of Hospital Equipment

Name of the Hospital - Mahankali Ayurvedic Hospital & Research Centre

Sr. No.	Equipment	Quantity
1	Bed	100
2	Bed Side Locker	100
3	Bed Side Stool	100
4	IV Stand	100
5	Foot Step Double	3
6	X- Ray Viewer Box	5
7	Examination Table	4
8	Bp Apparatus	10
9	Stethoscope	10
10	Torch	4
11	Thermometer	10
12	Weight Machine	2
13	Ent Set	2
14	Autoclave Drums 11×9	7
15	Biomedical Waste Color Coded Plastic Bins	4
16	Forceps	6
17	Dressing Trolley	6
18	Emergency Resuscitation Kit	2
19	Hot Water Bags	10

M. S. Shinde
PRINCIPAL

Nootan College of Physiotherapy,
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20	Instrument Tray	7
21	Medicine Trolley	3
22	Needle Cutter	7
23	Digital Clinical Thermometer	5
24	Sphygmomanoter Dial Type	2
25	Stretcher/ Patient Trolley	2
26	Nebulizer	2
27	Wheel Chair	2
28	Sterilizer	2
29	Autoclave	1
30	Suction Machine	2
31	ECG Machine	5
32	Ventilator	2
33	Centralized Oxygen Supply	Available


PRINCIPAL
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महाराष्ट्र MAHARASHTRA

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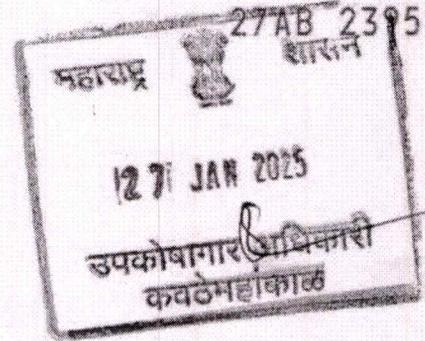
Nootan College of Physiotherapy
Narsinhgaon (Landgewadi) Sangli

य. म. क. माले

200

महगोख बागणे, कवठे महाकाल प. न. 416405

(Signature)



**MOU :AFFILIATED HOSPITAL AND PHYSIOTHERAPY
INSTITUTE**

An MOU is made on 03TH day of Feb, 2025

BETWEEN

Mahankali Ayurvedic Hospital and Research Centre, represented by Dr. Rutuj Ramling Mali, having its office and Hospital at Narsinhgaon Kavathemahankal Sangli, Dist- 416419, hereinafter called 'Affiliated Hospital' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the FIRST PART;



(Faint background text)
Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405

**Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra**

AND

Rashtriya Aarogya Nyaya Shanshodhan Sanstha, Trust having its office at Flat No.304, Third Floor, Dattabhumik Co-op. Housing Society Ltd., Nandivli Rd , Near Nala, Dombivli (E) – 421 201,. Represented by its' Director, Dr.Amol A. Patil, Age 37 years, for **NOOTAN COLLEGE OF PHYSIOTHERAPY, NARSINHGHAON, KAVATHEMAHANKAL** hereinafter called '**THE INSTITUTE**' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **SECOND PART**;

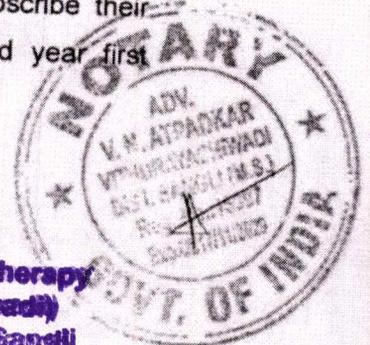
AND WHEREAS, the **INSTITUTE** was in need of **100** bedded **Mahankali Ayurvedic Hospital and Research Centre** affiliated agency for Clinical experience of Physiotherapy Students for their Physiotherapy Institute, who willingly agreed to offer Hospital and all basic facilities / amenities for clinical experience of Physiotherapy Students. Accordingly, the parties have decided to convert the mutually agreed terms and conditions of this **MOU** into writing, which are as follows:

- 1) **MOU** shall remain in force for period of 10 years subject to extension of period by mutually agreement. Both the parties shall have to give six month's advance intimation / notice if they want to terminate the said **MOU** before expiry of the agreement.
- 2) The Responsibility and liability arises regards to students is the sole responsibility of the second part
- 3) The Rotation plan will be planned as per discussion between both the parties and as per Syllabus of the Indian Physiotherapy Council, New Delhi
- 4) It shall be second part responsibility regards to the transport of the Physiotherapy students from institute to Hospital and other places as per the requirement and need of the students.
- 5) The matter of any dispute arises between, will be settled amicably by the Arbitrator appointed with consent of both the parties
- 6) Nominal fees for the affiliation will be leveyed by part I monthly Rs 100 per month as a maintaince and repair charges for wear and tear it will be remitted by second part every 10th of each month.

IN WITNESS WHEREOF the parties hereto have set and subscribe their respective hands and signed this Agreement on the day and year first hereinabove written.

M. Jadhav
PRINCIPAL

**Nootan College of Physiotherapy
Narsinhgaon (Londgawadi)
Kavathe Mahankal, Dist-Sangli
413405 Maharashtra**



SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED 'Affiliated Hospital' }

Dr. Rutuj Ramling Mali }

SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED LICENSEE }

Rashtriya Aarogya Nyaya Shanshodhan Sanstha
, represented by its

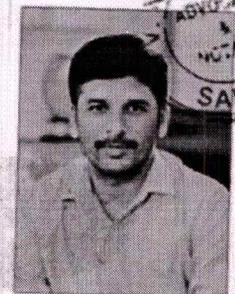
CEO }

Dr. Amol A. Patil }

Rutuj Mali



Amol Patil



Chief Executive Officer
Rashtriya Aarogya Nyaya Sanshodhan Sanstha's
Narshinghaon, Kavaihemahankal.

IN THE PRESENCE OF FOLLOWING }
WITNESSES: }

_____ }
_____ }

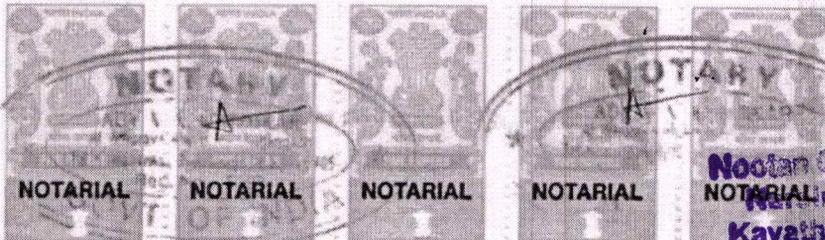
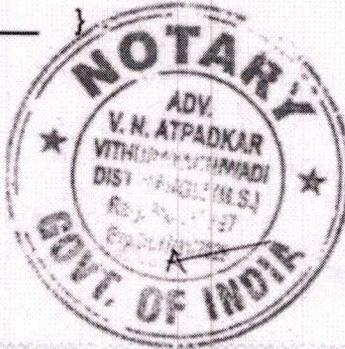
BEFORE ME,

V. N. ATPADKAR

ADV. V. N. ATPADKAR
Notary, Govt. of India
At Vilharbye, Landgi Po. Hingangaon
Tal. Kavaihemahankal, Dist. Sangli 416405
Reg. No. 19147

3 FEB - 2025
Notary & Registered
at Serial Numbers

66/2025



M. S. S. S.
PRINCIPAL
Nandan College of Physiotherapy,
Narshinghaon (Landgewadi)
Kavaihemahankal, Dist-Sangli
416405 Maharashtra



भारत सरकार

Government of India

अमोल अधिकराव पाटील
Amol Adhikrao Patil



जन्म तारीख / DOB: 15/07/1986

पुरुष / Male

8198 6857 6337



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता शेने, कासेगाव, सांगली,
वाळवा, महाराष्ट्र, 415404

Address: Shene, Kasegaon,
Sangli, Walwa, Maharashtra,
415404

8198 6857 6337



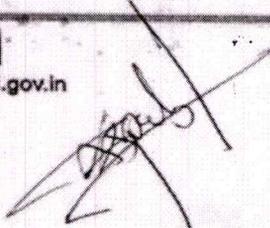
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help@uidai.gov.in

www

www.uidai.gov.in


PRINCIPAL
Nootan College of Physiotherapy
Narsinggaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

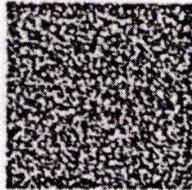
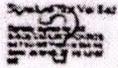


भारतीय विशिष्ट ओळख प्राधिकरण
भारत सरकार
 Unique Identification Authority of India
 Government of India

नोंदणी क्रमांक / Enrolment No.: 2006/51021/91803

To
 रुतुज रामलिंग माली
 Rutuj Ramling Mali
 Vertica D 302, Casa Bella Gold, Palava City
 Nilaje
 Kalyan
 Thane Maharashtra - 421201
 9967104032

QR Code with Photo: 21/07/2018



QR Code with Photo: 21/07/2018

आपला आधार क्रमांक / Your Aadhaar No. :

5700 7914 8518

VID : 9107 6364 8833 9424

माझे आधार, माझी ओळख



भारत सरकार
 Government of India



रुतुज रामलिंग माली
 Rutuj Ramling Mali
 जन्म तारीख/DOB: 21/11/1995
 लिंग/ GENDER: MALE

5700 7914 8518

VID : 9107 6364 8833 9424

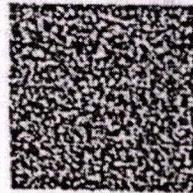
माझे आधार, माझी ओळख



भारतीय विशिष्ट ओळख प्राधिकरण
 Unique Identification Authority of India

पत्ता:
 वर्टिका डी 302, कॅसा बेल्ला गोल्ड, पलवा सिटी, निळाजे,
 कल्याण, ठाणे.
 महाराष्ट्र - 421201

Address:
 Vertica D 302, Casa Bella Gold, Palava
 City, Nilaje, Kalyan, Thane,
 Maharashtra - 421201



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- सूचना
- आधार अंकरहीचे प्रमाण आहे, नागरिकत्वाचे नाही.
 - ओळखीचे प्रमाण ऑनलाईन ओथोन्टीकेशन द्वारा प्राप्त करा.
 - हे इलेक्ट्रॉनिक प्रक्रिये द्वारा तयार झालेले एक पत्र आहे.

INFORMATION

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

- अतुधारस्त देशभरान्त मान्यता आहे.
- आधार भविष्यात सरकारी व खाजगी सेवांचे परयदे मिळविण्यास उपयुक्त आहे.
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.

Rutuj Mali

R. B. Mali
PRINCIPAL
 Nootan College of Physiotherapy
 Narsinhgaon (Landgewadi)
 Kavathe Mahankal, Dist-Sangli
 416406 Maharashtra



आरोग्य विभाग, जिल्हा परिषद, सांगली.

सन १९४९ च्या दि बॉम्बे नर्सिंग होम्स रजिस्ट्रेशन ॲक्टच्या कलम ५ अन्वये दिलेले

रजिस्ट्रेशन सर्टिफिकेट

Certificate of Registration under Section 5 of the Bombay Nursing Homes Registration Act, 1949 (विधय ५ अन्वये) (Under Rule 5)

Certificate No:- 02/2024-25

दि. बॉम्बे नर्सिंग होम रजिस्ट्रेशन ॲक्ट १९४९ अन्वये श्री DR.RUTUJ RAMLING MALI यांचे MAHANKALI AYURVEDIC HOSPITAL & RESEARCH CENTER, OASIS EDUCATIONAL CAMPUS M.G ROAD NARSINHGHAON TAL- KAVATHEMAHANKAL DIST- SANGLI 416419 जिल्हा सांगली. येथील नर्सिंग होम/ हॉस्पिटल / मॅटर्निटी होम रजिस्टर केले असून त्यासाठी परवाना देण्यात येत आहे.

This is certify that, Shri DR.RUTUJ RAMLING MALI has been registered under the Bombay nursing Homes Registration Act 1949 in respect of MAHANKALI AYURVEDIC HOSPITAL & RESEARCH CENTER Situated at OASIS EDUCATIONAL CAMPUS M.G ROAD NARSINHGHAON TAL- KAVATHEMAHANKAL DIST- SANGLI 416419 जिल्हा सांगली. and has been authorised to carry on the said Nursing Home/ Hospital / Maternity Home.

रजिस्ट्रेशन क्रमांक / Registration No.: 02/2024-25	रजिस्ट्रेशन दिनांक / Date of Registration: 04-02-2025
नूतनीकरण क्रमांक / No. of Renewal: ---	नूतनीकरण दिनांक / Date of Renewal: ---
प्रसूतीसाठी / Maternity :020 कॉट्स / Cots	इतर रुग्णांसाठी / Other Nursing Patients : 80 (0 ICU) कॉट्स / Cots

ठिकाण / Place:- सांगली

सर्टिफिकेट दिल्याचा दिनांक / Date of Issue Certificate:- 04/02/2025

सदरचे सर्टिफिकेट दिनांक 31-03-2027 पर्यंत कार्यवाहीत राहील.

This Certificate shall be valid up to 31-03-2027



(डॉ. विजयकुमार बाप)
जिल्हा आरोग्य अधिकारी,
जिल्हा परिषद सांगली

M. S. B. B.
PRINCIPAL

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AND

Rashtriya Aarogya Nyaya Shanshodhan Sanstha, Trust having its office at Flat No.304, Third Floor, Dattabhumik Co-op. Housing Society Ltd., Nandivli Rd , Near Nala, Dombivli (E) – 421 201,. Represented by its' Director, Dr.Amol A. Patil, Age 37 years, for NOOTAN COLLEGE OF PHYSIOTHERAPY, NARSINHGHAON, KAVATHEMAHANKAL hereinafter called '**THE INSTITUTE**' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **SECOND PART**;

AND WHEREAS, the INSTITUTE was in need of **30 bedded Mahalaxmi Multispeciality Hospital** affiliated agency for Clinical experience of Physiotherapy Students for their Physiotherapy Institute, who willingly agreed to offer Hospital and all basic facilities / amenities for clinical experience of Physiotherapy Students. Accordingly, the parties have decided to convert the mutually agreed terms and conditions of this MOU into writing, which are as follows:

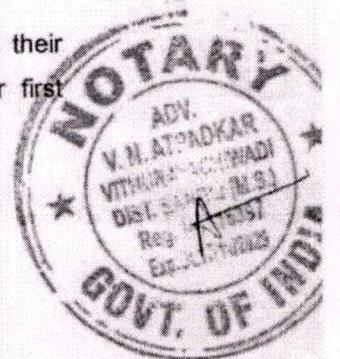
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- 4) It shall be second part responsibility regards to the transport of the Physiotherapy students from institute to Hospital and other places as per the requirement and need of the students.
- 5) The matter of any dispute arises between, will be settled amicably by the Arbitrator appointed with consent of both the parties
- 6) Nominal fees for the affiliation will be leveyed by part I monthly Rs 100 per month as a maintaince and repair charges for wear and tear it will be remitted by second part every 10th of each month.

IN WITNESS WHEREOF the parties hereto have set and subscribe their respective hands and signed this Agreement on the day and year first hereinabove written.

M. S. Patil

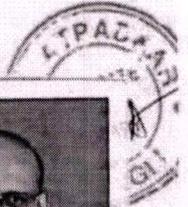
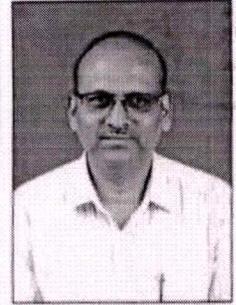
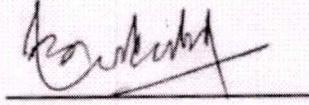
PRINCIPAL

**Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sanoli
416405 Maharashtra**



SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED 'Affiliated Hospital' }

Dr. Satish Gadade }



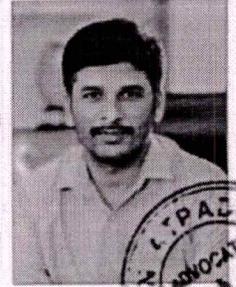
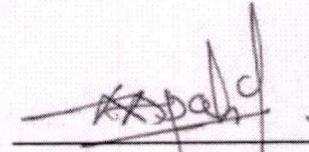
SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED LICENSEE }

Rashtriya Aarogya Nyaya Shanshodhan Sanstha

, represented by its

CEO }

Dr. Amol A. Patil }



Chief Executive Officer
Rashtriya Aarogya Nyaya Shanshodhan Sanstha's
Narshinhgaon, Kavalthomchankal.

IN THE PRESENCE OF FOLLOWING }
WITNESSES: }

_____ }

_____ }

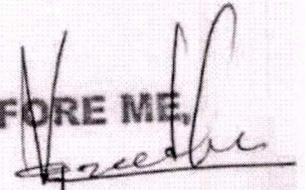
4 FEB 2025

Notary & Registered
at Serial Numbers

68/2025

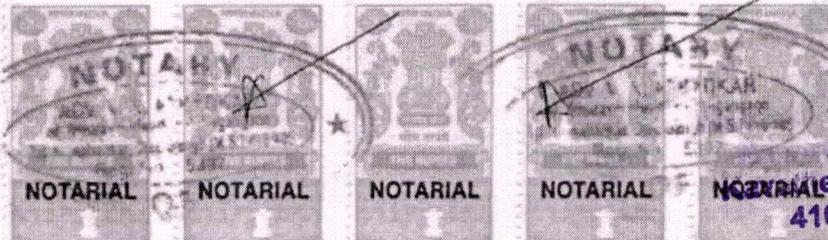


BEFORE ME,



ADV. V. N. ATPADKAR
Notary, Govt. of India

At Vithuraya, Road Po. Hingangaon
Tal. K. Mahankal, Dist. Sangli 416405
Reg. No. 15747



Principal
College of Physiotherapy,
Hingangaon (Landgewadi)
Tal. K. Mahankal, Dist. Sangli
416405 Maharashtra



भारत सरकार

Government of India

अमोल अधिकराव पाटील
Amol Adhikrao Patil



जन्म तारीख / DOB: 15/07/1986

पुरुष / Male

8198 6857 6337



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता शेने, कासेगाव, सांगली,
वाळवा, महाराष्ट्र, 415404

Address: Shene, Kasegaon,
Sangli, Walwa, Maharashtra,
415404

8198 6857 6337



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WWW

www.uidai.gov.in

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PRINCIPAL
Noctan College of Physiotherap,
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

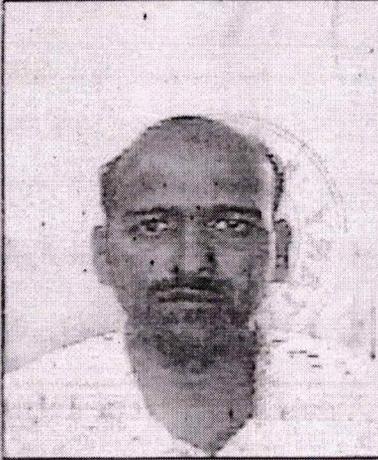


भारत सरकार
GOVERNMENT OF INDIA



Scanned with OKEN Scanner

Issue Date: 20/07/2013



डॉ. सतिष दर्याप्पा गडदे
Dr. Satish Daryappa Gadade
जन्म तारीख / DOB: 21/01/1975
पुरुष / MALE
Mobile No.: 9420441873

7056 7516 7509

7056 7516 7509

माझे आधार, माझी ओळख


PRINCIPAL
Nootan College of Physiotherapy
Narsinhgnon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416406 Maharashtra



सत्यमेव जयते

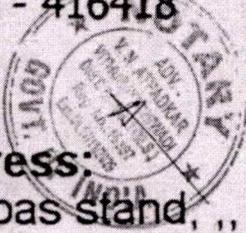
भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA



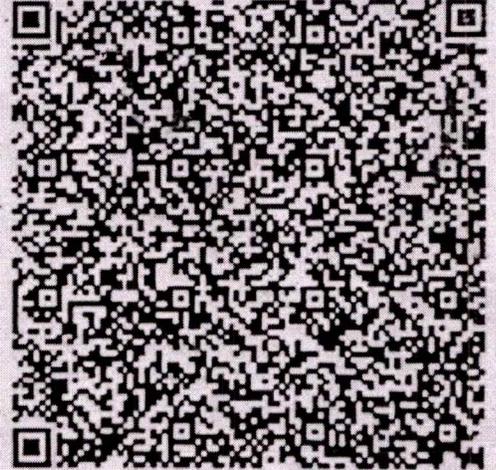
AADHAAR

Print Date: 05/09/2022

पत्ता:
,, नियर बास स्टॅड, ,, ,, कोगनोळी, सांगली,
महाराष्ट्र - 416418



Address:
near bas stand, ,, ,, Kognoli, Sangli,
Maharashtra - 416418



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Jy. S. S. S.

PRINCIPAL
Nootan College of Physiotherap,
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra



महाराष्ट्र MAHARASHTRA

2024

13 JAN 2025

27AB 236591

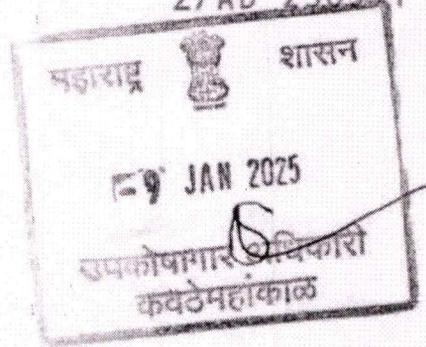
कवठेमहानकाल कक्षा 2005 केवल 100

PRINCIPAL

श्री Nootan College of Physiotherapy

हस्त Narsinghgaon Kavathemahankal, Dist.-Sangli

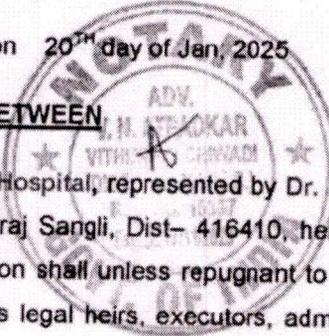
हस्ताक्षर, प्रमाण पत्र, and other handwritten notes and signatures.



MOU :AFFILIATED HOSPITAL AND PHYSIOTHERAPY INSTITUTE

An MOU is made on 20th day of Jan, 2025

BETWEEN



Samarth Neuro and Superspeciality Hospital, represented by Dr. Ravindra Patil, having its office and Hospital at Miraj Sangli, Dist- 416410, hereinafter called 'Affiliated Hospital' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **FIRST PART**;

M. Jadhav
PRINCIPAL
Nootan College of Physiotherapy,
Narsinghgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

AND

Rashtriya Aarogya Nyaya Shanshodhan Sanstha, Trust having its office at Flat No.304, Third Floor, Dattabhumik Co-op. Housing Society Ltd., Nandivli Rd , Near Nala, Dombivli (E) – 421 201,. Represented by its' Director, Dr.Amol A. Patil, Age 37 years, for NOOTAN COLLEGE OF PHYSIOTHERAPY, NARSINHGHAON, KAVATHEMAHANKAL hereinafter called 'THE INSTITUTE' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **SECOND PART**;

AND WHEREAS, the INSTITUTE was in need of _____ bedded **Samarth Neuro and Superspeciality Hospital** affiliated agency for Clinical experience of Physiotherapy Students for their Physiotherapy Institute, who willingly agreed to offer Hospital and all basic facilities / amenities for clinical experience of Physiotherapy Students. Accordingly, the parties have decided to convert the mutually agreed terms and conditions of this MOU into writing, which are as follows:

- 1) MOU shall remain in force for period of 10 years subject to extension of period by mutually agreement. Both the parties shall have to give six month's advance intimation / notice if they want to terminate the said MOU before expiry of the agreement.
- 2) The Responsibility and liability arises regards to students is the sole responsibility of the second part
- 3) The Rotation plan will be planned as per discussion between both the parties and as per Syllabus of the Indian Physiotherapy Council, New Delhi
- 4) It shall be second part responsibility regards to the transport of the Physiotherapy students from institute to Hospital and other places as per the requirement and need of the students.
- 5) The matter of any dispute arises between, will be settled amicably by the Arbitrator appointed with consent of both the parties
- 6) Nominal fees for the affiliation will be leveyed by part I monthly Rs 100 per month as a maintaince and repair charges for wear and tear it will be remitted by second part every 10th of each month.

IN WITNESS WHEREOF the parties hereto have set and subscribe their respective hands and signed this Agreement on the day and year first hereinabove written.

M. S. Patil

PRINCIPAL

**Nootan College of Physiotherapy,
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra**



SIGNED, SEALED & DELIVERED BY)

THE WITHIN NAMED 'Affiliated Hospital')

Dr. Ravindra Patil)

SIGNED, SEALED & DELIVERED BY)

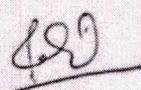
THE WITHIN NAMED LICENSEE)

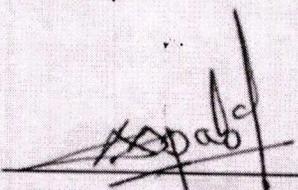
Rashtriya Aarogya Nyaya Shanshodhan
Sanstha

, represented by its

CEO

Dr. Amol A. Patil

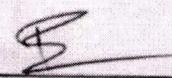
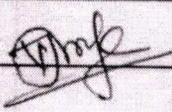

Dr. Ravindra Patil
M.B.B.S M.S.M.Ch.(Neuro)
Regd.No.2007/05/1368


Chief Executive Officer
Rashtriya Aarogya Nyaya Shanshodhan Sanstha's
Narshinngaon, Kavathemahankal.



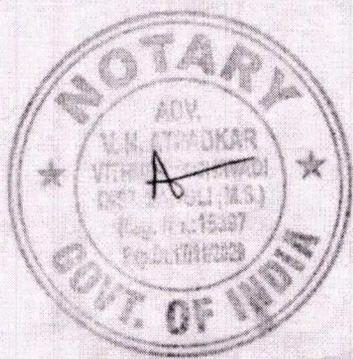
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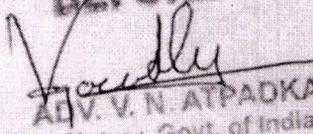
WITNESSES:)

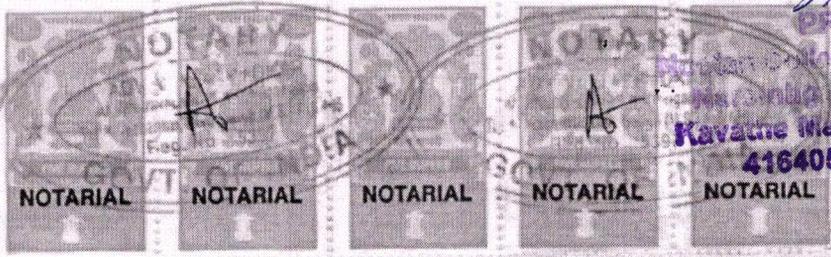

_____)

_____)

21 JAN 2025

Notary & Registered
at Serial Numbers 47
2025



BEFORE ME,

ADV. V. N. ATPADKAR
Notary Govt. of India
At Vithurayakawadi Po. Hingangaon
Tal. K. Mahankal, Dist. Sangli 416405
Reg. No. 15397




PRINCIPAL
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra


भारत सरकार
Government of India



रविंद्र राजराम पाटील
Ravindra Rajaram Patil
जन्म तारीख/DOB: 01/06/1983
पुरुष/ MALE

4001 5272 8373
VID : 9191 6963 1575 5814

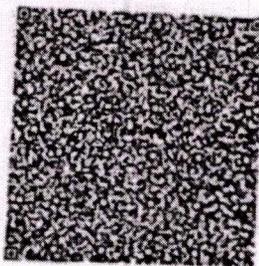
माझे आधार, माझी ओळख

Issue Date: 18/10/2011


भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India


पत्ता:
समर्थ न्युरो अँड सुपरस्पेशालीटी हॉस्पिटल, मिरज सांगली
रोड, भारती हॉस्पिटल समोर, मिरज, सांगली,
महाराष्ट्र - 416410

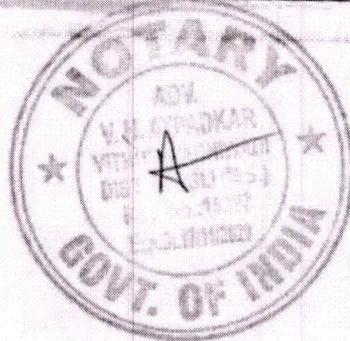
Address:
SAMARTH NEURO AND SUPERSPECIALTY
HOSPITAL, MIRAJ SANGLI ROAD, OPP.
BHARATI HOSPITAL, Miraj, Sangli,
Maharashtra - 416410



4001 5272 8373
VID : 9191 6963 1575 5814

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Download Date: 09/01/2023




PRINCIPAL
Nootan College of Physiotherapy,
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra



भारत सरकार

Government of India

अमोल अधिकराव पाटील
Amol Adhikrao Patil



जन्म तारीख / DOB: 15/07/1986

पुरुष / Male

8198 6857 6337



भारतीय विशिष्ट ओळख प्राधिकरण

Unique Identification Authority of India

पत्ता शेने, कासेगाव, सांगली,
वाळवा, महाराष्ट्र, 415404

Address: Shene, Kasegaon,
Sangli, Walwa, Maharashtra,
415404

8198 6857 6337



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help@uidai.gov.in

WWW

www.uidai.gov.in



M. S. Patil

PRINCIPAL

Nootan College of Physiotherapy,
Narsingheon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

SANGLI MIRAJ & KUPWAD CITY MUNICIPAL CORPORATION

FORM 'C'

(See Rule 5)

Certificate of Registration under section 5 of the Bombay Nursing Homes
Registration Act 1949

No.327

This is to Certify that Shri / Smt Dr. Ravindra Rajaram Patil
has been registered under the Bombay Nursing Homes Registration Act. 1949 in
respect of

" Samarth Neuro & Super Speciality Hospital "

(Here insert the name of the Nursing Home.)

Situated at Miraj and has been authorised to carry on the said
nursing home.

No. of Bed's for Other Patient - 100 Bed's

No. of Bed's for Manternity Patient - 00 Bed's

Registration No. 327

Date of Registration 8/2/2018

Place C.S.no.235/1/A/1,2 Sangli-Miraj Road, Miraj

Date of issue of certificate 31/03/2024

This certificate of registration shall be valid upto 31st March 200 31 MAR 2027

MEDICAL OFFICER OF HEALTH, SANGLI MIRAJ & KUPWAD CITY MUNICIPAL

CORPORATION (Here insert the name of Local Supervising Authority.)



Signature of the registering authority.

Medical Health Officer

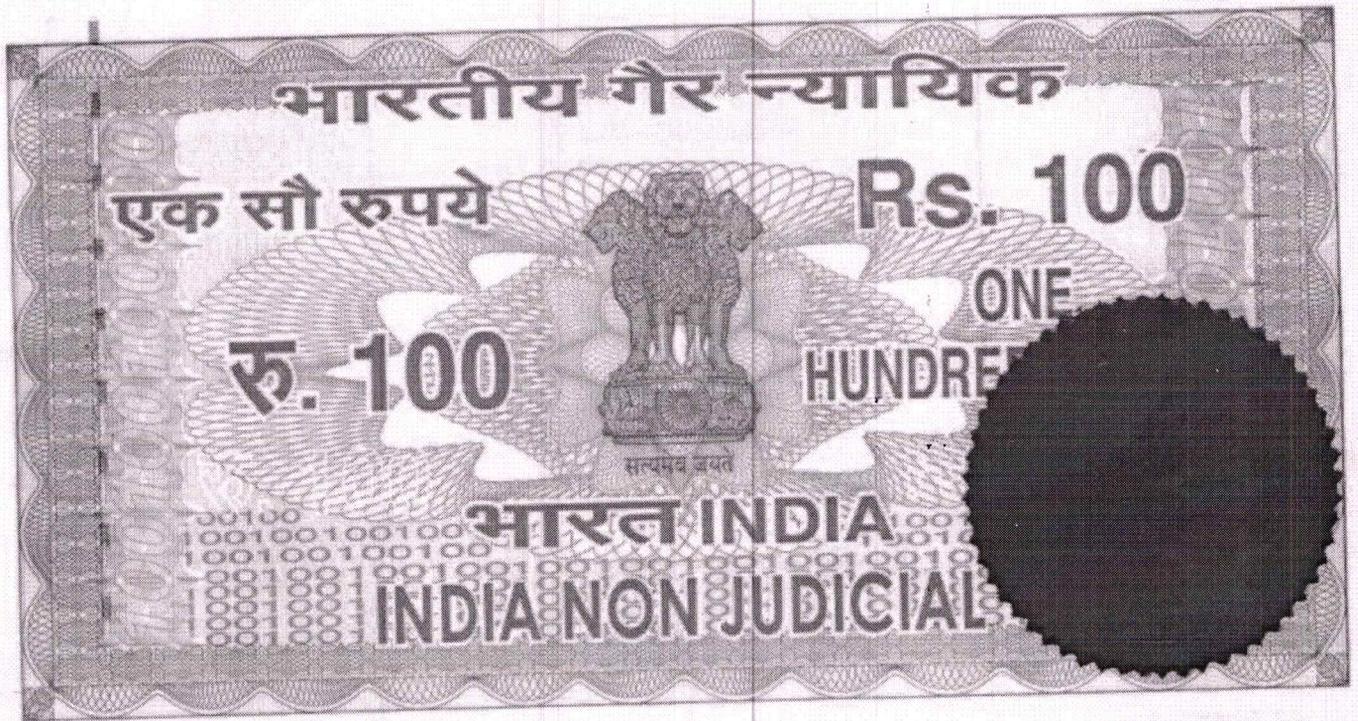
Pub. Health
Sangli Miraj & Kupwad City
Corporation

PRINCIPAL

Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

PRINCIPAL

Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra



महाराष्ट्र MAHARASHTRA

2024

27AB 236589

2005 क्रमांक 100
PRINCIPAL
Nootan College of Physiotherapy,
Marsingwan Kavathemahankal, Dist. Sangli
विक्रम परश्रम कोजेकार
20500
महाराष्ट्र

13 JAN 2025

महाराष्ट्र शासन
15 JAN 2025
उपकोषागार अधिकारी
कवठेमहाकाळ

MOU :AFFILIATED HOSPITAL AND PHYSIOTHERAPY

INSTITUTE

An MOU is made on 15TH day of Jan, 2025

BETWEEN

New Life ICU & Multispeciality Hospital, represented by Dr. Vikram Parshram Kojekar, having its office and Hospital at Vishrambhag Sangli, Dist- 416410, hereinafter called 'Affiliated Hospital' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **FIRST PART**;

(Signature)
PRINCIPAL
Nootan College of Physiotherapy,
Marsingwan (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

AND

Rashtriya Aarogya Nyaya Shanshodhan Sanstha, Trust having its office at Flat No.304, Third Floor, Dattabhumik Co-op. Housing Society Ltd., Nandivli Rd , Near Nala, Dombivli (E) – 421 201,. Represented by its' Director, Dr.Amol A. Patil, Age 37 years, for NOOTAN COLLEGE OF PHYSIOTHERAPY, NARSINHGHAON, KAVATHEMAHANKAL hereinafter called '**THE INSTITUTE**' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **SECOND PART**;

AND WHEREAS, the INSTITUTE was in need of 50 bedded **New Life ICU & Multispeciality Hospital** affiliated agency for Clinical experience of Physiotherapy Students for their Physiotherapy Institute, who willingly agreed to offer Hospital and all basic facilities / amenities for clinical experience of Physiotherapy Students. Accordingly, the parties have decided to convert the mutually agreed terms and conditions of this MOU into writing, which are as follows:

- 1) MOU shall remain in force for period of 10 years subject to extension of period by mutually agreement. Both the parties shall have to give six month's advance intimation / notice if they want to terminate the said MOU before expiry of the agreement.
- 2) The Responsibility and liability arises regards to students is the sole responsibility of the second part
- 3) The Rotation plan will be planned as per discussion between both the parties and as per Syllabus of the Indian Physiotherapy Council, New Delhi
- 4) It shall be second part responsibility regards to the transport of the Physiotherapy students from institute to Hospital and, other places as per the requirement and need of the students.
- 5) The matter of any dispute arises between, will be settled amicably by the Arbitrator appointed with consent of both the parties
- 6) Nominal fees for the affiliation will be leveyed by part I monthly Rs 100 per month as a maintaince and repair charges for wear and tear it will be remitted by second part every 10th of each month.

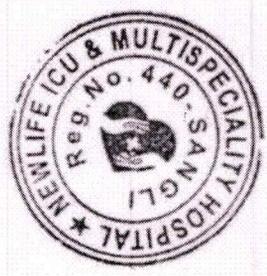
IN WITNESS WHEREOF the parties hereto have set and subscribe their respective hands and signed this Agreement on the day and year first hereinabove written.

Dr. Amol A. Patil
PRINCIPAL
Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED 'Affiliated Hospital' }
Dr. Vikram Parshram Kolekar }

SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED LICENSEE }
**Rashtriya Aarogya Nyaya Shanshodhan
Sanstha**
, represented by its

CEO
Dr. Amol A. Patil



[Signature]

Chief Executive Officer
Rashtriya Aarogya Nyaya Sanshodhan Sanstha
Narshinhgaon, Kavathemahankal.

IN THE PRESENCE OF FOLLOWING }
WITNESSES: }

[Signature]
[Signature]

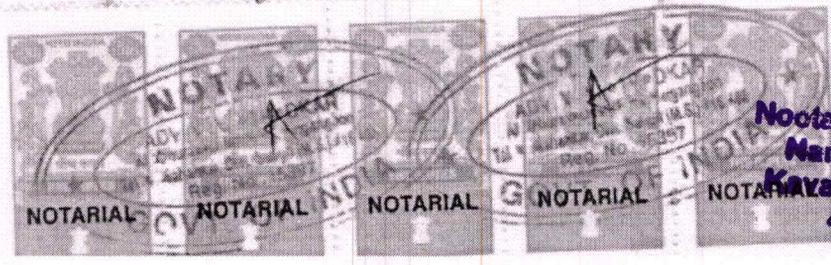


BEFORE ME,

[Signature]

ADV. V. N. ATPADKAR
Notary Govt. of India
At Vithurayurwadi Po. Hingangaon
Tal. K. Mahankal, Dist. Sangli 416405
Reg. No. 15347

20 JAN 2025
Notary & Registered
at Serial Numbers
43
2025



[Signature]
PRINCIPAL
Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra



भारत सरकार
Government of India



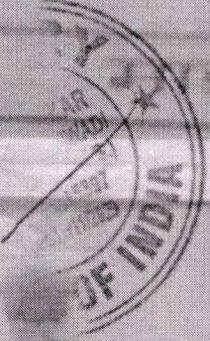
विक्रम परशराम कोळेकर
Vikram Parashram Kolekar
जन्म तारीख/DOB: 01/05/1992
पुल्ल/ MALE

8749 0382 8305

UID : 9145 8117 6179 6797

माझे आधार, माझे

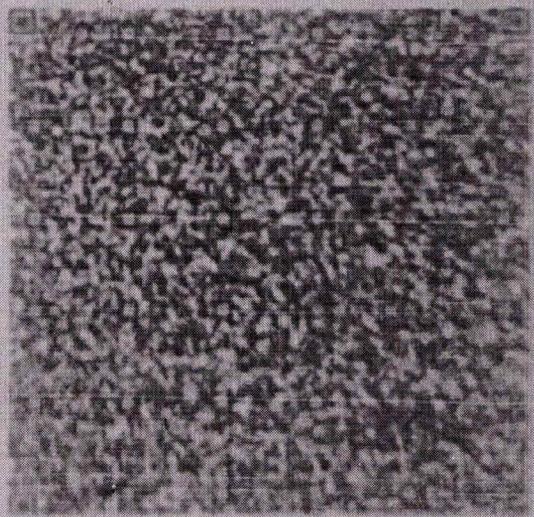
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भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India



Address:
SAMATANAGAR GALLI NO.10 BEHIND
WAREHOUSE NO.4, Miraj, Sangli,
Maharashtra - 416410



8749 0382 8305

UID : 9145 8117 6179 6797

J. Jadhav
PRINCIPAL
Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

5:21 pm ✓



भारत सरकार

Government of India

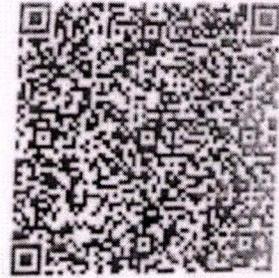
अमोल अधिकराव पाटील
Amol Adhikrao Patil



जन्म तारीख / DOB: 15/07/1986

पुरुष / Male

8198 6857 6337



भारतीय विशिष्ट ओळख प्राधिकरण
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पत्ता शेने, कासेगाव, सांगली,
वाळवा, महाराष्ट्र, 415404

Address: Shene, Kasegaon,
Sangli, Walwa, Maharashtra,
415404

8198 6857 6337



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J. S. Patil
PRINCIPAL
Nootan College of Physiotherapy
Narsinggaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

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SANGLI MIRAJ & KUPWAD CITY MUNICIPAL CORPORATION

FORM 'C'

(See Rule 5)

Certificate of Registration under section 5 of the Bombay Nursing Homes
Registration Act 1949

No. 440

Dr. Raviraj Dhondiram Kamble

This is to Certify that Shri / Smt. Dr. Vikram Parshram Kolekar

has been registered under the Bombay Nursing Homes Registration Act. 1949 in
respect of

" New Life ICU & Multispeciality Hospital "

(Here insert the name of the Nursing Home.)

Situated at Sangli and has been authorised to carry on the said
nursing home.

No. of Bed's for Other Patient - 10 Bed's

No. of Bed's for Manternity Patient - 00 Bed's

Registration No. 440

From 8/1/2024 Other
Total Bed

+ 10 Bed's
20 Bed's

Date of Registration 29/04/2022

Place 354/1, Plot No. 13, Opp. Rajmati Girls Highschool, Neminathnagar
Vishrambag, Sangli

Date of issue of certificate 29/04/2022

This certificate of registration shall be valid upto 31st March 2025

MEDICAL OFFICER OF HEALTH, SANGLI MIRAJ & KUPWAD CITY MUNICIPAL
CORPORATION (Here insert the name of Local Supervising Authority.)



Signature of the registering authority.

Medical Health Officer

Sangli Miraj & Kupwad City

M. Subrah
PRINCIPAL

Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

R. Subrah
PRINCIPAL

Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra



महाराष्ट्र MAHARASHTRA

2024

27AB 236590

2005 100 3 JAN 2025
PRINCIPAL
Nootan College of Physiotherapy
Narsinhgaon Kavathe Mahankal, Dist. Sangli
महाराष्ट्र शासन
15 JAN 2025
सपकोषागार अधिकारी
कवठेमहान्काल

**MOU: AFFILIATED HOSPITAL AND PHYSIOTHERAPY
INSTITUTE**

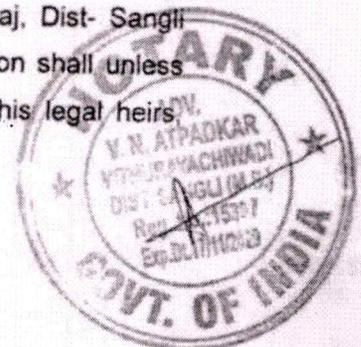
An MOU is made on 15TH day of Jan, 2025

BETWEEN

"Noble Hospital Shinde Orthopaedic & Joint Centre" represented by Dr. Girish Suryakant Shinde, having its office and Hospital at Miraj, Dist- Sangli 416410, herein after called 'Affiliated Hospital' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **FIRST PART**;

[Signature]
PRINCIPAL

**Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra**



AND

Rashtriya Aarogya Nyaya Shanshodhan Sanstha, Trust having its office at Flat No.304, Third Floor, Dattabhumik Co-op. Housing Society Ltd., Nandivli Rd , Near Nala, Dombivli (E) – 421 201, . Represented by its' Director, Dr.Amol A. Patil, Age 37 years, for NOOTAN COLLEGE OF PHYSIOTHERAPY, NARSINHGAON, KAVATHEMAHANKAL hereinafter called 'THE INSTITUTE' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **SECOND PART;**

AND WHEREAS, the INSTITUTE was in need of 50 bedded **Noble Hospital Shinde Orthopaedic & Joint Centre** affiliated agency for Clinical experience of Physiotherapy Students for their Physiotherapy Institute, who willingly agreed to offer Hospital and all basic facilities / amenities for clinical experience of Physiotherapy Students. Accordingly, the parties have decided to convert the mutually agreed terms and conditions of this MOU into writing, which are as follows:

- 1) MOU shall remain in force for period of 10 years subject to extension of period by mutually agreement. Both the parties shall have to give six month's advance intimation / notice if they want to terminate the said MOU before expiry of the agreement.
- 2) The Responsibility and liability arises regards to students is the sole responsibility of the second part
- 3) The Rotation plan will be planned as per discussion between both the parties and as per Syllabus of the Indian Physiotherapy Council, New Delhi
- 4) It shall be second part responsibility regards to the transport of the Physiotherapy students from institute to Hospital and other places as per the requirement and need of the students.
- 5) The matter of any dispute arises between, will be settled amicably by the Arbitrator appointed with consent of both the parties
- 6) Nominal fees for the affiliation will be leveyed by part I monthly Rs 100 per month as a maintaince and repair charges for wear and tear it will be remitted by second part every 10th of each month.

IN WITNESS WHEREOF the parties hereto have set and subscribe their respective hands and signed this Agreement on the day and year first hereinabove written.


PRINCIPAL

**Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra**

SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED 'Affiliated Hospital' }

Dr. Girish Suryakant Shinde }

SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED LICENSEE }

Rashtriya Aarogya Nyaya Shanshodhan Sanstha }

, represented by its }

CEO }

Dr. Amol A. Patil }

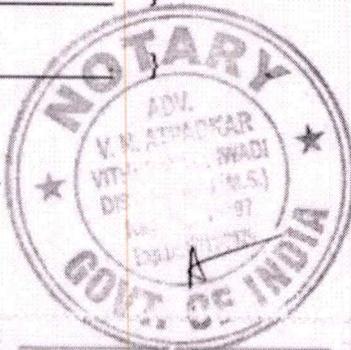
Dr. Amol A. Patil }

IN THE PRESENCE OF FOLLOWING }
WITNESSES: }

_____ }
_____ }

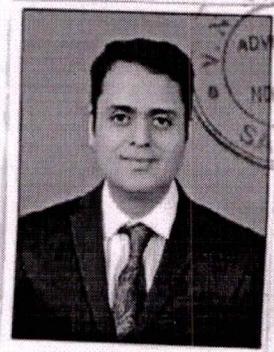
12 0 JAN 2025.

Notary & Registered
at Serial Numbers _____

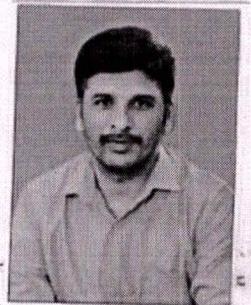


BEFORE ME,

ADV. V. N. ATPADKAR
Notary Govt. of India
At Vitthalwadi Po. Hingangaon
Tal. K.Marnasol, Dist. Sangli 416406
Reg. No. 15347



[Signature]
Dr. Girish S. Shinde
M.S.(Ortho) Mumbai
Fellowship in Arthroplasty (Shalby)
Trauma & Arthroplasty Surgeon
Reg. No. : 2004/02/819



[Signature]
Chief Executive Officer
Rashtriya Aarogya Nyaya Sanshodhan Sanstha's
Narshinhgaon, Kavathemahankal.





भारतीय विशिष्ट ओळख प्राधिकरण

भारत सरकार

Unique Identification Authority of India
Government of India

नोंदविण्याचा क्रमांक / Enrollment No 1190/10143/06411

22/08/2011

To,
गिरीश सूर्यकांत शिंदे
Girish Suryakant Shinde
vijay nagar, walnesswadi arun banglow, karmvir bhaurao
patil ho. socity
Sangli
Sangli Sangli
Maharashtra 416418

Ref: 108 / 07E / 215310 / 215460 / P



UE422105556IN



आपला आधार क्रमांक / Your Aadhaar No. :

5836 8735 9281

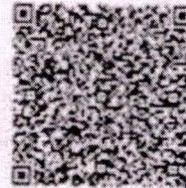
आधार — सामान्य माणसाचा अधिकार



भारत सरकार
GOVERNMENT OF INDIA



गिरीश सूर्यकांत शिंदे
Girish Suryakant Shinde
जन्म वर्ष / Year of Birth : 1980
पुरुष / Male



5836 8735 9281

M. P. Patil
PRINCIPAL

Noolan College of Physiotherapy
Narsinggaon (Landgewadi)
Pathe Mahankal, Dist-Sangli
416405 Maharashtra

आधार — सामान्य माणसाचा अधिकार



भारत सरकार

Government of India

अमोल अधिकराव पाटील
Amol Adhikrao Patil



जन्म तारीख / DOB: 15/07/1986

पुरुष / Male

8198 6857 6337



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता शेने, कासेगाव, सांगली,
वाळवा, महाराष्ट्र, 415404

Address: Shene, Kasegaon,
Sangli, Walwa, Maharashtra,
415404

8198 6857 6337



1947



help@uidai.gov.in

WWW

www.uidai.gov.in

S. S. S. S.

PRINCIPAL

Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

Scanned with CamS.

SANGLI MIRAJ & KUPWAD CITY MUNICIPAL CORPORATION

FORM 'C'

(See Rule 5)

Certificate of Registration under section 5 of the Bombay Nursing Homes Registration Act 1949

No.279

This is to Certify that Shri / Smt Dr. Girish Suryakant Shinde
has been registered under the Bombay Nursing Homes Registration Act. 1949 in
respect of

" Noble Hospital Shinde Orthopaedic & Joint Centre "

(Here insert the name of the Nursing Home.)

Situated at Miraj and has been authorised to carry on the said
nursing home.

No. of Bed's for Other Patient -	30 Bed's
No. of Bed's for Manternity Patient -	00 Bed's

Registration No. 279

Date of Registration 4/10/2013

Place Opp. Aditya Diagnostic Centre, Gulabrao Patil
Medical College Road, Miraj

Date of issue of certificate 1/4/2024

This certificate of registration shall be valid upto 31st March 2003
MEDICAL OFFICER OF HEALTH, SANGLI MIRAJ & KUPWAD CITY MUNICIPAL
CORPORATION (Here insert the name of Local Supervising Authority.)

Signature of the registering authority.

Medical Officer of Health
Public Health Officer
Sangli Miraj & Kupwad City
Corporation

Dr. Girish S. Shinde
M.S.(Ortho) Mumbai
Fellowship in Arthroplasty (Shalby)
Trauma & Arthroplasty Surgeon
Reg. No.: 2004/02/819

PRINCIPAL
Nootan College of Physiotherapy
Nootan College of Physiotherapy
Kavathe Mahabankhande Sangli
Kavathe Mahabankhande Sangli
416406 Maharashtra



महाराष्ट्र MAHARASHTRA

2024

27AB 236593

13 JAN 2025

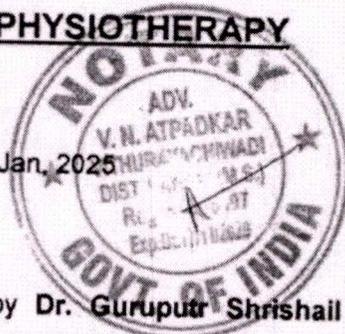
2005
PRINCIPAL
Nootan College of Physiotherapy
Narsinhganj Kavathe Mahankal, Dist. Sangli
कारण
100/500
श्री विठ्ठल शशी मोदी मुद्रांक विद्वान्
श्रीमती
श्रीमती

महाराष्ट्र शासन
19 JAN 2025
उपकोषागार अधिकारी
कवठेमहान्काल

MOU :AFFILIATED HOSPITAL AND PHYSIOTHERAPY INSTITUTE

An MOU is made on 15TH day of Jan, 2025

BETWEEN



Shriratna Multispeciality Hospital, represented by Dr. Guruputr Shrishail Bagali, having its office and Hospital at Miraj, Dist- Sangli 416410, herein after called 'Affiliated Hospital' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **FIRST PART**;

M. J. Bagali
PRINCIPAL
Nootan College of Physiotherapy,
Narsinhganj (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

AND

Rashtriya Aarogya Nyaya Shanshodhan Sanstha, Trust having its office at Flat No.304, Third Floor, Dattabhumik Co-op. Housing Society Ltd., Nandivli Rd , Near Nala, Dombivli (E) – 421 201,. Represented by its' Director, Dr.Amol A. Patil, Age 37 years, for NOOTAN COLLEGE OF PHYSIOTHERAPY, NARSINHGHAON, KAVATHEMAHANKAL hereinafter called 'THE INSTITUTE' (which expression shall unless repugnant to the context or meaning thereof and shall include his legal heirs, executors, administrators and assigns) of the **SECOND PART**;

AND WHEREAS, the INSTITUTE was in need of 100 bedded Shiratna Multispeciality Hospital affiliated agency for Clinical experience of Physiotherapy Students for their Physiotherapy Institute, who willingly agreed to offer Hospital and all basic facilities / amenities for clinical experience of Physiotherapy Students. Accordingly, the parties have decided to convert the mutually agreed terms and conditions of this MOU into writing, which are as follows:

- 1) MOU shall remain in force for period of 10 years subject to extension of period by mutually agreement. Both the parties shall have to give six month's advance intimation / notice if they want to terminate the said MOU before expiry of the agreement.
- 2) The Responsibility and liability arises regards to students is the sole responsibility of the second part
- 3) The Rotation plan will be planned as per discussion between both the parties and as per Syllabus of the Indian Physiotherapy Council, New Delhi
- 4) It shall be second part responsibility regards to the transport of the Physiotherapy students from institute to Hospital and other places as per the requirement and need of the students.
- 5) The matter of any dispute arises between, will be settled amicably by the Arbitrator appointed with consent of both the parties
- 6) Nominal fees for the affiliation will be leveyed by part I monthly Rs 100 per month as a maintaince and repair charges for wear and tear it will be remitted by second part every 10th of each month.

IN WITNESS WHEREOF the parties hereto have set and subscribe their respective hands and signed this Agreement on the day and year first hereinabove written.


PRINCIPAL

**Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra**

SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED 'Affiliated Hospital' }

Dr. Guruputr Shrishail Bagali }

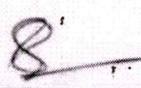
SIGNED, SEALED & DELIVERED BY }
THE WITHIN NAMED LICENSEE }

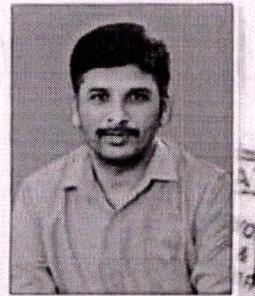
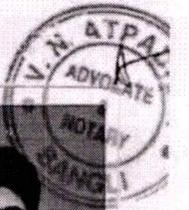
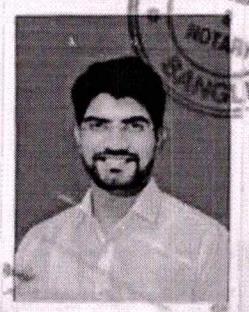
Rashtriya Aarogya Nyaya Shanshodhan Sanstha

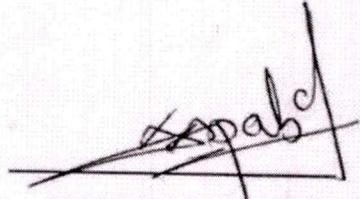
, represented by its

CEO

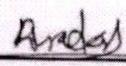
Dr. Amol A. Patil

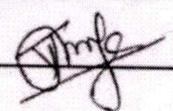

Shriratna Multispeciality Hospital
Railway Station Road,
Pratap Colony, Miraj-416410
☎:0233-2224555




Chief Executive Officer
Rashtriya Aarogya Nyaya Sanshodhan Sanstha's
Narshinghaon, Kavathemahankal.

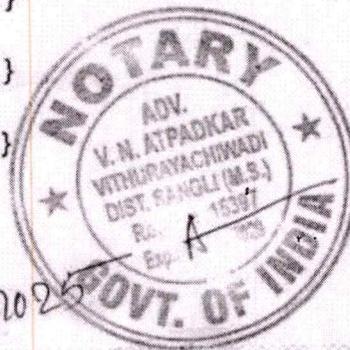
IN THE PRESENCE OF FOLLOWING }
WITNESSES: }



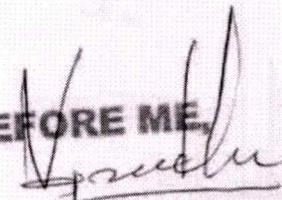


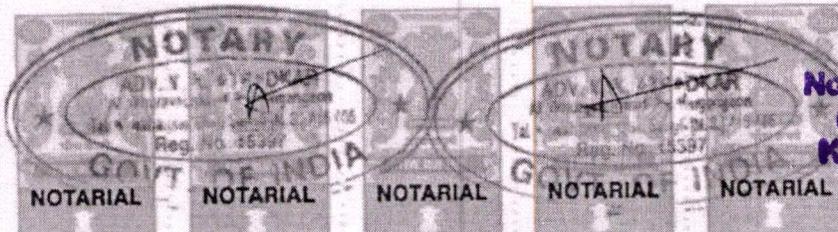
20 JAN 2025

Notary & Registered
at Serial Numbers _____



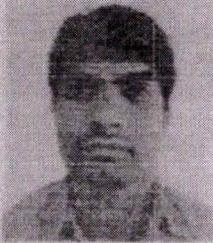
BEFORE ME,

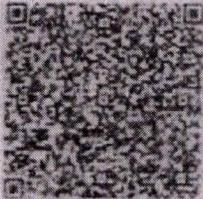

ADV. V. N. ATPADKAR
Notary Govt. of India
At Vithurayachiwadi Po, Hingangaon
Tal. K. Mahankal, Dist. Sangli 416405
Reg. No. 15397




PRINCIPAL
Nootan College of Physiothera,
Narsinghaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

 भारत सरकार
Government of India

 गुरुपुत्र श्रीशैल बगली
Guruputra Shrishai Bagali
जन्म तारीख / DOB : 10/07/1990
पुरुष / Male



5401 3236 2781

आधार - सामान्य माणसाचा अधिकार

 भारत सरकार
Unique Identification Authority of India

पत्ता माणिकनाळ, माणिक नळ, सांगली, बोरगी खुर्द, महाराष्ट्र, 416413
Address: Maniknal, Manik Nal, Sangli, Borgi(khurd), Maharashtra, 416413

5401 3236 2781

1947
1800 300 1947

 help@uidai.gov.in

 www.uidai.gov.in

M. S. M. M.
PRINCIPAL

Nootan College of Physiotherapy,
Narsinghaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416406 Maharashtra



भारत सरकार

Government of India

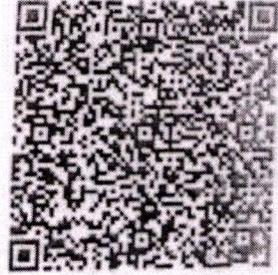
अमोल अधिकराव पाटील
Amol Adhikrao Patil



जन्म तारीख / DOB: 15/07/1986

पुरुष / Male

8198 6857 6337



भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

पत्ता शेने, कासेगाव, सांगली,
वाळवा, महाराष्ट्र, 415404

Address: Shene, Kasegaon,
Sangli, Walwa, Maharashtra,
415404

8198 6857 6337



1947



help@uidai.gov.in

www

www.uidai.gov.in

H. G. Patil
PRINCIPAL

Nootan College of Physiotherapy
Narsinhgaon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

Scanned with CamS

SANGLI MIRAJ & KUPWAD CITY MUNICIPAL CORPORATION
FORM 'C'

(See Rule 5)

Certificate of Registration under section 5 of the Bombay Nursing Homes
Registration Act 1949

331
No.

Dr. Guruputra Shrishail Bagali
Dr. Sachin Ramchandra Pawar
Dr. Vijay S. Kulkarni

This is to Certify that Shri / Smt

.....
Dr. Santoshsing Rajput

has been registered under the Bombay Nursing Homes Registration Act. 1949 in
respect of

" Shriratna Multispeciality Hospital "

.....
(Here insert the name of the Nursing Home.)

Situated at **Miraj** and has been authorised to carry on the said
nursing home.

No. of Bed's for Other Patient - 50 Bed's
No. of Bed's for Manternity Patient - 00 Bed's

Registration No. **331**

Date of Registration **27/04/2018**

Place **Station Roa, Pratap colony, Opp. Palkar Hospital, Miraj**

Date of issue of certificate **1/7/2024**

This certificate of registration shall be valid upto 31st March' 200 **31 MAR 2027**

MEDICAL OFFICER OF HEALTH, SANGLI MIRAJ & KUPWAD CITY MUNICIPAL
CORPORATION (Here insert the name of Local Supervising Authority.)



Dr. Sankar
PRINCIPAL
Nandan College of Physiotherapy
Marjinhon (Landgewadi)
Kavathe Mahankal, Dist-Sangli
416405 Maharashtra

W. H. B.
Signature of the registering authority.

Medical Health Officer,
Public Health
Sangli Miraj & Kupwad City
Corporation