



# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK  
दिडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004  
Tel: (0253) 2539244/6659244/241, 242 Student Helpline: 0253-2539111/6659111/100  
Website: www.muhs.ac.in, E-mail: planning@muhs.ac.in



**डॉ. राजेंद्र शिवाजी बंगाळ**

एम.बी.बी.एस, एम.डी. (न्यायवैद्यकशास्त्र), डी.एन.बी, एल.एल.बी.

**कुलसचिव**

**Dr. Rajendra Shivaji Bangal**

M.B.B.S, M.D. (Forensic Medicine), D.N.B, L.L.B.

**Registrar**

No. MUHS / PB / UG / Nursing / P-5 / 11 / 2023

Date: 25/01/2023

To,  
**The President / Secretary,**  
Leading Organization For Rural Development,  
F-4271, Shriram Tower, 203,  
Behind Battuwar Complex,  
Gadchiroli - 442 605

Mobile No. - 7773945388

Email - organizationlord42gmail.com, amit.salve@rediffmail.com


**Sub: Grant of First Time Affiliation for the Academic Year 2022 - 23.**

Sir,

As per the provision of section 65 (4) of Maharashtra University of Health Sciences Act 1998, I am directed to inform you that, on the basis of the Local Inquiry Committee report the Hon'ble Vice Chancellor is pleased to Grant First Time Affiliation to your College, "Shri Sai Institute of Nursing & Medical Science, Wakdi, Gadchiroli - 442 605" of B.Sc Nursing Course for the academic year 2022-23 subject to approval of Academic Council as per the provision under section (65)2 of MUHS Act 1998, by following due procedure. However, this affiliation is subject to the following conditions: -

- 1) The intake capacity shall be 60 students for B.Sc Nursing Course.
- 2) Fulfilment of following deficiencies within 3 months from the date of issuance of this letter to the University (Academic Section).
  - i) Teaching staff is available except 01 Professor and 01 Associate Professor.
- 3) Rules and Regulations made by Indian Nursing Council, New Delhi, Govt. of Maharashtra and the University, as amended from time to time, will be binding on the College.
- 4) The College should obtain approval of teachers from the Maharashtra University of Health Sciences, Nashik.

(P.T.O.)

  
PRINCIPAL

SHRI SAI INSTITUTE OF NURSING  
& MEDICAL SCIENCE, WAKADI  
GADCHIROLI - 442605

- 5) The College should obtain the permission for admitting the students from the Admission Regulating Authority, Mumbai.
- 6) The College should obtain approval of fee schedule for the admission of the students from the Fee Regulating Authority, Mumbai.
- 7) This First Time Affiliation is Valid for Academic year 2022-23 only.
- 8) The next batch of students shall not be admitted unless continuation of affiliation from the University is obtained by the College.



*[Signature]*  
Registrar

**Copy to :-**

- 1) The Secretary, Indian Nursing Council, 8th Floor, NBCC Center, Okhla Phase-I, New Delhi – 110020.
- 2) The Secretary, Medical Education & Drugs Department, Mumbai
- 3) The Director, Directorate Medical Education & Research, Mumbai.
- 4) The Secretary, Maharashtra Nursing Council, Mumbai
- 5) The Commissionerate, CET Cell, 8<sup>th</sup> Floor, New Excelsior Building, A. K. Nayak Marg, Fort, Mumbai - 400 001.
- 6) The Chairman, Admission Regulating Authority, 8<sup>th</sup> Floor, New Excelsior Building, A. K. Nayak Marg, Fort, Mumbai - 400 001.
- 7) The Chairman, Fees Regulating Authority, 3<sup>rd</sup> Floor, 49, Kherwadi, Ali Yawar Jung Marg, Bandra (E), Mumbai – 400 051.
- 8) The P.S. to Hon'ble Vice Chancellor, MUHS, Nashik.
- 9) The P.S. to Pro Vice Chancellor, MUHS, Nashik
- 10) The Registrar, MUHS, Nashik.
- 11) The Controller of Examinations, MUHS, Nashik.
- 12) The Finance and Accounts Officer, MUHS, Nashik
- 13) HOD, Academic Section – 2, MUHS, Nashik.
- 14) HOD, Eligibility Section, MUHS, Nashik.
- 15) HOD, Computer Section, MUHS, Nashik.
- 16) HOD, Student Welfare Section, MUHS, Nashik
- 17) HOD, Special Cell, MUHS, Nashik

*[Signature]*  
PRINCIPAL  
SHRISAI INSTITUTE OF NURSING  
& MEDICAL SCIENCE, WAKADI  
GADCHIROLI - 442605





# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

Maharashtra University of Health Sciences, Nashik

वणी-दिंडोरी रोड, म्हास्रुळ, नाशिक-४२२००४, Vani-Dindori Road, Mhasrul, Nashik- 422 004

Tel: (0253)-2539198,200,268,307 Student Helpline: (0253)-2539111/6659111/100

Web.: www.muhs.ac.in E-mail : academicnursing@muhs.ac.in



**डॉ. राजेंद्र शिवाजी बंगाळ**

एम.बी.बी.एस, एम.डी. (न्यायवैद्यकशास्त्र), डी.एन.बी, एल.एल.बी.

**कुलसचिव**

**Dr. Rajendra Shivaji Bangal**

M.B.B.S, M.D. (Forensic Medicine), D.N.B, L.L.B

**Registrar**

Outward No.: MUHS/Acad/E6-B /UG/155146//495/2024

Date: 13/06/2024

To,

The Principal,

Leading Organization For Rural Development,

Shri Sai Institute of Nursing & Medical Science,

Wakdi, Gadchiroli-442 605

**Sub.: Continuation / Extension of Affiliation for Academic Year 2024-25 (Nursing UG)**

(Issued under provision No. 05 & 13 of University Direction No. 02/2016)

**Ref.: Academic Council Resolution No. 108/2024, dated 23/04/2024**

Sir / Madam,

With reference to above cited subject, I am directed to communicate that, as per the University laid down procedure & your proposal for Continuation of Affiliation & / or Extension of Affiliation, the Hon'ble Academic Council is pleased to grant Continuation of Affiliation & / or Extension of Affiliation for Academic Year 2024-25 as per the provision u/s 68 and 65(4) of MUHS Act, 1998, for the Under Graduate B.Sc. Nursing Course of your College, as under:

- the intake capacity of students shall be **B.Sc. Nursing - 60**
- It is mandatory to obtain the State Government permission as per GR dated 28/02/2018 (as applicable).
- Following deficiencies shall be strictly complied within Thirty Days, without fail.

(i) Teaching Staff:

Year	Prof. cum Principal			Prof. cum Vice Principal			Professor			Associate Professor			Assistant Professor			Tutor		
First to Third Year	R	E	D	R	E	D	R	E	D	R	E	D	R	E	D	R	E	D
	01	01	-	01	-	01	-	-	-	02	01	01	03	03	-	11	11	-

**Req. :** Indicates no. of required teaching staff as per Council norms.

**Ext. :** Indicates no. of Existing approved teaching staff.

**Def. :** Indicates no. of deficit teaching staff as per Council norms.

P.T.O

(ii) **Infrastructural Requirements: -**

- Nutrition Lab and CHN Lab are combined in one hall.

(iii) **IPD / OPD: -**

(iv) **Other: Payment of all University dues including affiliation fees & submission of bank guarantee (wherever applicable).**

- a. The College shall submit Affidavit in the prescribed format as per Academic Council's Resolution No. 229/2013 (format attached).
- b. For those UG / PG qualifications that are not yet recognized by the Central Govt., it shall be mandatory for the College to apply to the Central Council / Commission through Central Govt. and ensure that "Permitted" / "Not Recognized" qualifications are enlisted in "Recognized Qualifications", failing which University shall not grant Continuation of Affiliation to such courses from ensuing Academic Year & no student shall be admitted in such courses.

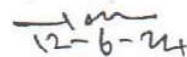
You are requested to comply with the above mentioned deficiencies within the stipulated time without fail and submit compliance report.

**Important Note:**

- 1) This Continuation / Extension of affiliation is issued for the A.Y. 2024-2025 subject to the permission of Indian Nursing Council / Commission and / or State Government and if the permission is declined by the said authorities this Continuation / Extension of Affiliation shall be treated as cancelled. The College is not authorized to admit the students for 1<sup>st</sup> Year of the course until receipt of permission of the Indian Nursing Council / Commission and / or State Government.
- 2) The admission shall be done through the Competent Authority only.


Thanking you.

Yours,

  
12-6-24  
Registrar

**Copy to:-**

1. The Competent Authority, Admission Regulating Authority, Mumbai.
2. The Controller of Examinations, M.U.H.S., Nashik.
3. The Dy. Registrar, Eligibility Dept., M.U.H.S., Nashik.
4. The HOD, Computer Dept., M.U.H.S., Nashik.

  
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**कुलसचिव**

**Dr. Rajendra Shivaji Bangal**

M.B.B.S., M.D. (Forensic Medicine), D.N.B., L.L.B.

**Registrar**

No. MUHS / PB / UG / Nursing / P-5 / /2024

Date: 13 /09/ 2024

To,

1550

The President / Secretary,  
Leading Organization For Rural Development,  
At. Shriram Towers, Flat no.203,  
Near Battuwar Building,  
Main Chandrapur Road, Gadchiroli,  
Dist. Gadchiroli – 442 605  
Mobile No. : 7773945388 / 9421817684  
Email : [organizationlord42@gmail.com](mailto:organizationlord42@gmail.com)

**Sub: Grant of First Time Affiliation for the Academic Year 2024 – 25.**

Sir,

As per the provision of section 65 (4) of Maharashtra University of Health Sciences Act 1998, I am directed to inform you that, on the basis of the Local Inquiry Committee report and Circulatory Permission from Academic Council vide Resolution No. 203/2024 the Hon'ble Vice Chancellor is pleased to Grant First Time Affiliation to, "Shri Sai Institute of Nursing and Medical Science, P.B.B.Sc. Nursing, At. Survey No 223, Wakadi, Tal & Dist. Gadchiroli – 442 605." P.B.B.Sc Nursing Course for the Academic Year 2024-2025. However, this affiliation is subject to the following conditions:-

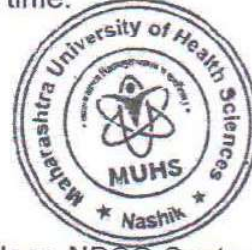
- 1) The intake capacity shall be 50<sup>✓</sup> Students for P.B.B.Sc Nursing Course.
- 2) Rules and Regulations made by Indian Nursing Council, New Delhi, Govt. of Maharashtra and the University, as amended from time to time, will be binding on the College.
- 3) The College should obtain approval of teachers from the Maharashtra University of Health Sciences, Nashik.
- 4) The College should obtain the permission for admitting the students from the Admission Regulating Authority, Mumbai.
- 5) The College should obtain approval of fee schedule for the admission of the students from the Fee Regulating Authority, Mumbai.

(P.T.O.)

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PRINCIPAL

SHRI SAI INSTITUTE OF NURSING  
& MEDICAL SCIENCE, WAKADI  
GADCHIROLI - 442605

- 6) This First Time Affiliation is Valid for Academic year 2024-25 only.
- 7) The next batch of students shall not be admitted unless continuation of affiliation from the University is obtained by the College.
- 8) It is mandatory for the College / Institute to register on AISHE portal and submit the required data on AISHE portal time to time.



*13-9-24*  
Registrar

**Copy to :-**

- 1) The Secretary, Indian Nursing Council, 8th Floor, NBCC Center, Okhla Phase-I, New Delhi – 110020.
- 2) The Secretary, Medical Education & Drugs Department, Mumbai
- 3) The Director, Directorate Medical Education & Research, Mumbai.
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*Karapal*  
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& MEDICAL SCIENCE, WAKAD  
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