



**महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक**  
**Maharashtra University of Health Sciences, Nashik**  
 वणी-दिंडोरी रोड, म्हासुरुळ, नाशिक-४२२००४, Vani-Dindori Road, Mhasrul, Nashik- 422 004  
 Tel: (0253)-2539198,200,268,307 Student Helpline: (0253)-2539111/6659111/100  
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**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/154138/ 1396 /2024

Date: 03/06/2024

To,

**The Principal**

Shivai Charitable Trust,  
 Shivai Institute of Nursing, (SION),  
 Latur Road, Near Laxmi Pati, Koregaonwadi,  
 Tal.Omerga, Dist.-Dharashiv- 413 606

**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:

- he intake capacity of students shall be **B.Sc. Nursing- 50.**
- 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 Only	R	E	D	R	E	D	R	E	D	R	E	D	R	E	D	R	E	D
	01	-	01	01	01	-	-	-	-	01	01	-	02	02	-	09	09	-

**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: \*\*

(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.

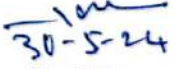
You are requested to comply with the above mentioned deficiencies within the stipulated time without fail and submit compliance report.

**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,

  
30-5-24  
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.