



26.12.2020
தமிழ்நாடு தமில்நாடு TAMILNADU
The Registrar
Madurai Kamaraj University
Madurai - 21.

CB 338097

S. விஜயகுமார்
சென்னை மாநகர் கல்விப்பேரவையுடன்
R.O.C. No 4401/B1/2009-2
155, சென்னை மாநகர் கல்விப்பேரவை
சென்னை-21.

AFFIDAVIT

I, Dr .V.S. Vasantha (Name of the authorized person)
Registrar of the Madurai Kamaraj University (name of the College / Institution /
Trust / Society, etc.) aged about 55 years, resident of No. 15, Sivasamy
Street, Thendral Nagar, Thirupalai Extn, Madurai District-625 014, am the authorized
signatory of the application made to the Regional Committee of the National
Council for Teacher Education at Bangalore seeking
grant of recognition / permission for conducting a course in Teacher Education titled
B.A.B.Ed. & B.Sc. B.Ed. with intake of (50 + 50).


REGISTRAR
MADURAI KAMARAJ UNIVERSITY
MADURAI-625 021



2. That the Madurai Kamaraj University Society / Trust / Institution / College (strike out whichever is not applicable) is in possession of land as per the following description: -

Total Area (in sqr. Mts.) : 2204525.04

Address:

Plot No:

Khasra No: 34,35

Village/Town/City: Vadapalanji

District: Madurai

State: Tamil Nadu

Area in Square Meters: 2204525.04

3. That the land is on ownership basis / lease basis for a minimum period of _____ years (in figures and words) (Strike out whichever is not applicable).
4. That the land is free from all encumbrances.
5. That the land is exclusively meant for running the education institution (land use) and the permission of the Competent Authority to this effect has been obtained vide letter No. Not Applicable dated _____ of the communication.
6. That the said premises shall not be used for running any educational activity/institution, other than the teacher education programme for which recognition is being sought.
7. That the copy of the affidavit shall be displayed on the website of the Institution for general public.
8. I do hereby swear that my declaration under Para's(1) to (6) are true and correct and that it conceals nothing and that no part of this is false. In case the contents of affidavit are found to be incorrect or false, I shall be liable for action under the relevant provision of the Indian Penal Code and other relevant laws.

Signature: _____

Name of the Applicant: **Dr. V.S. Vasantha**

Address: _____

REGISTRAR

MADURAI KAMARAJ UNIVERSITY

MADURAI-625 021

Tel : _____

E-mail address : **mkuregistrar@gmail.com**

Website address : **www.mkuniversity.ac.in**

Place: **Madurai**

Date: _____



Solemnly affirmed and

Signed in my Presence at

S. KATHIRAVAN B.Com., B.L.,
ADVOCATE & NOTARY
Ent.No.Ms. 34 / 1998
TB ROAD
USILAMPATTY TOWN
MADURAI District
Call: 99656 50001