

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 - Ideal institute of nursing, palghar**

Name of Trust / Society		
Registration Certificate To be uploaded on web site clear and original copy		Trust / Society :- To be uploaded on web site Yes / E-20948M
		Trust Deed / Bylaws:- To be uploaded on web site
		Hospital Ownership Documents:- Yes
		Hospital (Bombay Nursing Act) :- Yes PAL/67/2023
		MPCB Certificate of Parent Hospital :- To be uploaded on web site
Hospital Type as Per Bombay Nursing Act :-		
Hospital (Bombay Nursing Act) issuing Authority :-		
Hospital Bed as per Certificate:-		
Name of the College / Institute (As per First Affiliation letter)	:	Ideal institute of nursing
Address	:	Village Posheri Taluka-wada, Dist-palghar 421303
Email ID	:	Idealinstituteofnursing2019@gmail.com
Telephone / Mobile No.(s)	:	9920010180 / 375020520
Website	:	www.idealinstituteofnursing.com
College Code	:	151136

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
 IDEAL INSTITUTE OF NURSING
 AT POST- POSHERI, TALUKA - WADA,
 DIST. - PALGHAR, MH- 421303

Chairman of LIC

Member Of LIC

Member Of LIC