



# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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**डॉ. राजेंद्र शिवाजी बंगाल**

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 / Physio / P-6 / **1399** /2024

Date: **03** /09/ 2024

To,  
The President / Secretary,  
Smt. Gurubai Batkadli Shikshan Sanstha,  
Kadgaon, Tal. Gadhinglaj  
Dist. Kolhapur – 416502.  
Mobile No. – 9422427431.  
Email – sbphysiokadgaon@gmail.com

**Sub : Grant of First Time Affiliation for the academic year 2024 - 25..**

Sir / Madam,

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. 197/2024 the Hon'ble Vice Chancellor is pleased to Grant First Time Affiliation to, **“Late Sureshanna Batkadli College of Physiotherapy, Kadgaon, Tal. Gadhinglaj, Kolhapur.”** B.P.Th Course for the Academic Year **2024-25**. However, this affiliation is subject to the following conditions.

- 1) The intake capacity shall be **60** students for **B.P.Th Course**.
- 2) Rules and Regulations made by the Govt. and the University, as amended from time to time, will be binding on the College.
- 3) The college should obtain approval/recognition for teachers from 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.)

- 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 of MUHS, is obtained by college/Institute.
- 8) It is mandatory for the College / Institute to register on AISHE portal and submit the required data on AISHE portal time to time.



Yours,

*[Signature]*  
12-9-24  
Registrar

**Copy to: -**

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