



No. of Pages
 Date
 Title & Nature
 Deponent/Executant
 Solely affirmed and declared before me
 Who is identified by
 vocate

बिहार BIHAR
 १५०५६
 १६-१२-१९

१००।- ओम प्रकाश सिंह
 सचिव सर्वोदय बी.एड कॉलेज
 बरनप, शिवसागर अजनी कु० श्रीवास्तव
 मुद्रांक विक्रेता
 ला० नं०-६२/९६
 सासाराम (रोहतास)

बोपागार पदाधिकारी
 रोहतास (सासाराम)

AFFIDAVIT

I, **Dr. Om Prakash Singh** (Name of the authorized person)
 Son of **Jai Gobind Singh** and **Secretary** of the **Sarvoday B.Ed
 College** (name of the College / Institution / Trust / Society, etc.)
 aged about **43** years, resident of **G.T Road, Sasaram, Near- Mico,
 Distt- Rohtas (Bihar)-821115**, am the authorized signatory of the
 application made to the Regional Committee of the National
 Council for Teacher Education at Bhubaneswar seeking grant of
 recognitor / permission for conducting a course in Teacher
 Education titled **_B.Ed & D.El.Ed with One Unit** intake.



2. That the Sarvoday Charitable Trust is in possession of land as per the following description: -

2.1 Total Area (in sqr. Mts.) -3124.39

2.2 Address:

Plot No: 853,854,879

Khasra No:

Village/Town/City: Karup

District: Rohlas

State: Bihar

Builtup Area in Square Meters: 3011.64

Bounded by

North: Vinod Ram

South: Ram Bhajan Singh

East: Vinod Ram

West: Shankar Dyal Singh

Registered in the office of: Sub Registrar, Sasaram on 23.2.2013

3. That the land is on ownership basis.

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. 50/LCA dated 8.5.2015 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: OM PRAKASH SINGH

Address: G.T. Road, Sasaram Near- Mico, Distt- Rohtas (Bihar)-821115

Tel : 06184-291333

E-mail address : sarvodayssm1@gmail.com

Website address : www.sarvoday.org.in

Place: Sasaram

Date: 18.12.2019

I identify the Signature/s, F.I.L. T.J. of
the document who has put their
Signature/R... in the presence

ADVOCATE