

Maharashtra University of Health Sciences, Nashik
Inspection Committee Report for Academic Year 2026-2027



Clinical Material in Hospital

Name of College : Singam College of Nursing, Solapur

Faculty: B.Sc, Nursing

HOSPITAL DETAILS

Sr. No.	Particulars to be verified	Particular	Adequate/ Inadequate
1	The Institute / College shall execute a MoU with any institute for affiliation of hospital in addition to minimum 330 bedded parent Hospital (Affiliated hospital must be 50beddedor more.) To be made available on web site	Yes	Adequate
a.	Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.: Copy to be made available on web site	Yes	Adequate
b.	Student Bed Ratio for UG & PG to be verified:(As per MSR) Calculate at Actual	Yes	Adequate
c.	Average Bed Occupancy in % : (Minimum 75%)	Yes	Adequate
d.	Clinical facilities for PG to be verified:-(As per MSR)		
	(i) Whether OPD is functioning to be verified (ii) Total No of OPD (on the day of inspection) (iii) Average Number of patients attending OPD(current year) (iv) Average Number of Delivery (Current year) (v) Average Number of abnormal Delivery (Current year)		05 5700 45 05
<ul style="list-style-type: none"> • As per Central Council Norms/ University Norms, above Infrastructure must be available at College. • If Infrastructure is available, then mark "Adequate"& do not attach any Documents it should be available on college website • In case of "Inadequate", it must be marked as "Inadequate" with evidence. To be submit to university with report 			

Here we declare all relevant document uploaded are clear and visible on web site & are true as per my knowledge & Belief

Any Other, Please Specify:-

Date:-

Dean/ Principal Stamp & Signature

Anand S

Member of LIC

PRINCIPAL
SINGAM COLLEGE OF NURSING
107, Doddi, Mulegaon Road,
Solapur-413 228.

Chairman of LIC

Member of LIC



Singam Medical & Educational Foundation
Singam College of Nursing

107, Mulegaon Road Near Laxmi Temple, Doddi, Solapur - 413228. (Maharashtra)
Cell : 9423776878, 9270421471 E-mail : singamcollegeofnursing@gmail.com www.singamcollegeofnursing.ir

MUHS Nashik Affiliated, Govt. of Mah. Approved

Ref. No. SCON/79/2026.

Date : 18/02/2026.

To,

H.R Department.

Raghoji kidney & multi speciality
Hospital Solapur

Subject: Request permission for Clinical posting of 1ST Semester B.Sc Nursing Students. (As per our MOU)

Respected Madam/Sir,

With reference to above mentioned subject, as per curriculum of 1ST Semester students have to undergo Nursing Foundation I Clinical posting. We would like to post our students in your esteemed hospital from 23/02/2026 to 20/03/2026. We request you to permit our students from 23/02/2026 to 20/03/2026 Please consider our request and do the needful.

Thanking You,

Your's Faithfully



o/c.
[Signature]

[Signature]

PRINCIPAL
SINGAM COLLEGE OF NURSING
107, Doddi, Mulegaon Road,
Solapur-413 228.



सोलापूर महानगरपालिका, सोलापूर
आरोग्य विभाग (प्रपत्र-सी)
महाराष्ट्र शुश्रूषागृह नोंदणी अधिनियम
१९४९ चे कलम ५ अन्वये)

Solapur Municipal Corporation , Solapur
Health Department (Form C)
Under Section 5 of the Maharashtra
Nursing Home Registration Act 1949

नर्सिंग होम नोंदणी प्रमाणपत्र

प्रमाणपत्र देण्यात येते की ,

डॉ. श्री./श्रीमती : डॉ. श्री. विजयकुमार दामोदर राघोजी

शैक्षणिक अर्हता : एमएस
यांची, महाराष्ट्र शुश्रूषागृह नोंदणी अधिनियम १९४९ खाली आ. संस्था

संस्थेचे नाव : राघोजी किडनी हॉस्पिटल अँड रिसर्च सेंटर

संस्थेचा पत्ता : 34,35,36 मोहिते नगर होटगी रोड

उपरोक्त नर्सिंग होम कायद्यांतर्गत नोंदणी करण्यात आलेली आहे . तसेच सादर रुग्णालय /
दवाखाना चालविण्यासाठी त्यांना हे प्रमाणपत्र देणेत येत आहे.

नोंदणी क्रमांक : LMS2020006991

नोंदणी दिनांक : 22 - 03 - 2023

प्रसुतीसाठी :

इतर रुग्णांसाठी : 100

ठिकाण : सोलापूर

वैध प्रमाणपत्र कालावधी : दि.01/04/2023 ते दि. 31/03/2026 पर्यंत

The certificate is issued,

Dr. Mr. / Mrs : Dr. Shri. Vijaykumar Damodar Raghooji

Educational Qualification : MS

Register Organization Under Maharashtra Nursing Home
Registration Act 1949

Organization Name : Raghooji Kidani Hospital And Resarch Center

Organization Address : 34,35,36 , Mohite Nagar Hotagi Road

Registered under the above Nursing Home Act. Certificate is provided to run
the hospital / clinic prescribed.

Registration Number : LMS2020006991

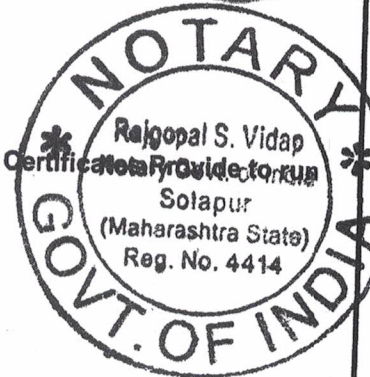
Registration Date : 22 - 03 - 2023

For Delivery :

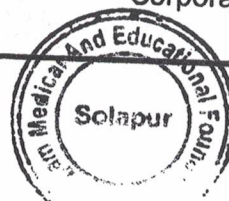
For other Patients : 100

Place : Solapur

Valid Period : From 01/04/2023 To 31/03/2026



Digitally signed by DS SOLAPUR
MUNICIPAL CORPORATION 1
Date: 2023.03.23 12:33:29 +05:30
Reason: Issued by MOH (Dr.
Basvaraj Lohare)
Location: License
Department, Solapur Municipal
Corporation, Solapur



Principal
Singam College of Nursing
Solapur