

# **Verification Certificate**

## **Certificate Holder's Information**

CVC	
CVC08dfa8c	
CERTIFICATE TYPE	
Master	
CERTIFICATE HOLDER'S NAME	CERTIFICATE HOLDER'S NUMBER
ALI YOUSUF ALI	DH0027
CERTIFICATE HOLDER'S EMAIL	
BabAlnour2@Hotmail.com	
Course Information	
DISCIPLINE / COURSE TITLE	
ADMINISTRATION HOSPITAL	
COURSE START DATE	GRADUATION DATE
02/04/2022	03/05/2023
DEPARTMENT	
ADMINISTRATION HOSPITAL	
GRADE	SCORE
85%	Excellent

#### **Organization's Information**

**Bab alnoor for Education and Training** (ID: 48

[avatar user="alnour" size="96" align="left"]

babalnour2@hotmail.com



## **Verification Certificate**

COUNTRY	CITY
Libya	Benghazi

### **Organization's Information**

**Bab alnoor for Education and Training** (ID: 48

[avatar user="alnour" size="96" align="left"]

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Issued on 29th April 2024
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