

## **Verification Certificate**

## **Certificate Holder's Information**

CVC	
CVCc6b259f	
CERTIFICATE TYPE	
Certificate of completion	
CERTIFICATE HOLDER'S NAME	CERTIFICATE HOLDER'S NUMBER
Saida Makhlouf Makhlouf	503
CERTIFICATE HOLDER'S EMAIL	
admin@lacb.org.ly	
Course Information	
DISCIPLINE / COURSE TITLE	
الدبلومه المهنية في التمريض	
COURSE START DATE	GRADUATION DATE
12/09/2022	02/03/2023
COUNTRY	CITY
Libya	Benghazi

## **Organization's Information**

**Libyan Association forcapacity Building (ID: 45** 

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

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Issued on 6th May 2024
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