

Verification Certificate

Certificate Holder's Information

CVC	
CVC49cb679	
CERTIFICATE TYPE	
Certificate of completion	
CERTIFICATE HOLDER'S NAME	CERTIFICATE HOLDER'S NUMBER
Said Salim Said	505
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

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