VACCINATION CERTIFICATE

This is to certify that:

Child Information:

Name: rohit

Date of Birth: 9/1/2005

Gender: male

Vaccination Details:

Vaccine: DOLO

Description: FEVER

Date Administered: 11/9/2025

Time: 8:00:00 PM

Administered By:

Doctor: Docter1

Hospital: Apollo

Address: NIE MEN'S HOSTEL, Ashokapuram,

Scan QR code to verify this certificate

This certificate is issued by DigiVax Digital Vaccination Management System
Certificate ID: 690f99c25f0a0431579333
Issued on 11/12/2025