

To

The Register

Centro Escolar University, Manila, Philippines.

**Subject: Consent to provide information about my degree to
Bangladesh Medical & Dental Council.**

Dear Sir,

**I am Dr. Orakatul Jannat, Student ID 15-15151 passed MS in
Orthodontics from CEU manila campus. Now I need to do the
equivalence of this degree in my country and the authority
here is Bangladesh Medical & Dental Council. I, therefore,
request you to provide them the information they need for
the verification. Thanks in advance**

Orakatul Jannat

Dr. Orakatul Jannat

Student ID- 15-15151

Email- orakatuljannat@gmail.com