



000219

KANO STATE HOSPITALS MANAGEMENT BOARD

SHEIKH MOHAMMED JIDDA GENERAL HOSPITAL

No. 72 Murtala Mohammed Way Fagge, Kano

Your Ref: _____ Date: _____

Our Ref: _____

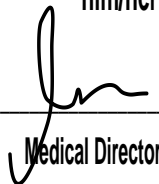
To: _____

MEDICAL EXAMINATION CERTIFICATE

This is to certify that I have this _____ 19th _____ Daye of _____ Mar 2025

Examined SANI IBRAHIM SANI of Yantandu Dala L.G.A KANO and found

him/her physical fit unit for the Travelling Training/Appointment


Medical Director

DR. M.S USMAN
Name


Signature

Zonal Director
Sheikh Mohammed Jidda
General Hospital Kano

DR. M.S USMAN
Attending Doctor