



Certificate of Achievement

*Having achieved all the requirements and
outcomes of*

FIRST AID LEVEL 3

COMMENTS

Awarded to

F. KHAN

8302125140089

Id Number

CI: 685

Registration Number

Presented by Destination Medicine under this seal on

Principal Signature

*Co-ordinator
Signature*

01/12/2027

Expiry Date



SCPFAL3/12/2024/001

Certificate Number

This certificate is issued without any alteration of any kind