

United Arab Emirates

Ministry of Health

## Equivalence of Certificates

**Personal Information:**

Applicant No. \_\_\_\_\_

Name \_\_\_\_\_

Nationality \_\_\_\_\_

Date of Birth \_\_\_\_\_

Sex \_\_\_\_\_

**For HRPM Section Use:**

Review Requested By \_\_\_\_\_

Comments: \_\_\_\_\_

**General Education:**

Total yrs. of education before Nursing \_\_\_\_\_

**Academic Nursing Education:**

Duration of Study ( not less than 1yr) \_\_\_\_\_

Year Graduated \_\_\_\_\_

University \_\_\_\_\_

Country of Origin \_\_\_\_\_

**Academic Degree prior to the one to be equated: (if possible)****For Evaluation Committee Use**

لإستعمال لجنة التقييم

Meeting No. &amp; Date \_\_\_\_\_

رقم و تاريخ الإجتماع

Academic Equivalence \_\_\_\_\_

المعادلة الأكاديمية

Name	الإسم	Signature	التوقيع	Name	الإسم	Signature	التوقيع
Fatima Rifai	فاطمة الرفاعي			Abdulla AlNuaimi	عبد الله النعيمي		
Rawaa Madi	روعة ماضي			Sheikha Saif	شيخة سيف		
Mariam Surrou	مريم سرور			Sheikha Ibrahim	شيخة إبراهيم		
Zeinab Abdulla	زينب عبد الله			Raghda Omar	رغدة عمر		

Comments

ملاحظات