

28th May 2014

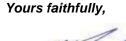
Saudi Commission for Health Specialties PO Box 94656, Riyadh 11614, Kingdom of Saudi Arabia

Dear Sir/Madam,

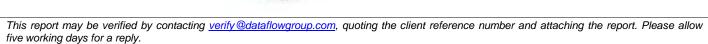
Subject - Verification Result

DataFlow, hereby, certifies that the following credentials have been checked, the results are as stated below.

DF Barcode	SCHS Ref #	Name of applicant	Passport Number
S003-VR-14-010554	2014025318	Wael Manaa	N003466475
Checks Details		Information Provided	Information Verified
Education	Institution	Tishreen University	Correct
	Qualification	Doctor of Dental Medicine	Correct
	Conferred Date	29/10/2001	Correct
	Diploma Received	Yes	Correct
	Comments	Verified – Education details have been verbally verified by Ms. Raida Hallaj, Director of Student Affairs Department at Tishreen University.	
		An updated report will be sent on receipt of written communication. Please refer to Annexure 1 for document submitted by the Applicant.	



For DataFlow



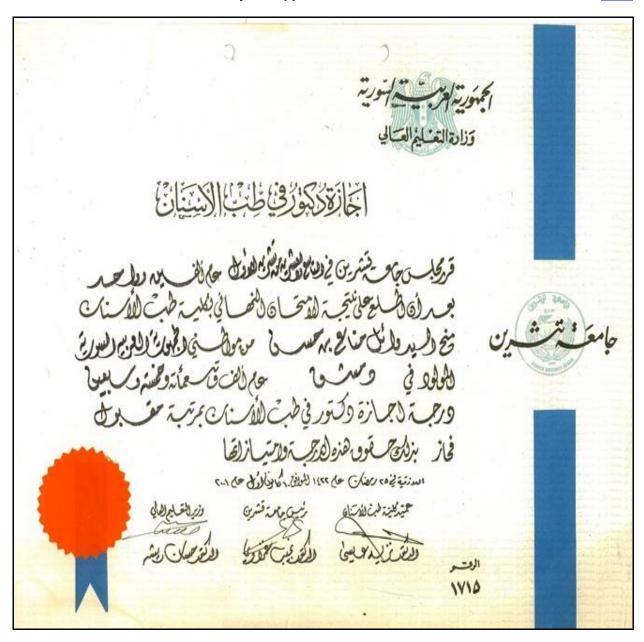
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Annexure 1: Document Submitted by the Applicant

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