OGBOMOSO BAPTIST HIGH SCHOOL

P. M. B. 525, OGBOMOSO.

FOUNDED 1ST SEPTEMBER 1973

SCHOOL LEAVING TESTIMONIAL

It is hereby certified that

AMOLE FUNMILOLA SERAH ADMIN. NO.: 21994

(Name: Surname First)

Attended this school from 2011 to 2013

Entering in SS TWO And leaving after completing SS Three in his/her last Senior Secondary School Certificate Examination take in MAY/JUNE 2013 He/She offer the following subjects:

1. English Language
2. Mathematics
3. Biology
4. Agric. Science
5. Economics
6. Chemistry
7. Physics
8. Yoruba Language
9. Geography
10.

His/her co-curricular activities were -

And the special office(s) he/she held was/were Laboratory Prefect

Academically he/she was Good And his/her Character was Satisfactory

Special remarks (if any) -

Student's Signature (for identification)

Date: 14th May, 2013

Principal

National Examinations Council (NECO)
Dr Nnamdi Azikwe road, Western Bye Pass, P.M.B 159, Minna, Niger State, Nigeria

SSCE JUN/JUL Examination Result Details: AMOLE FUNMILOLA SERAH

Last Name:	AMOLE	**Exam No:**	30482736JE
Other Names:	FUNMILOLA SERAH	**Exam Year:**	2013
Center No:	0250252	**Exam Type :**	JUN/JUL
Centre Name :	OGBOMOSO BAPTIST HIGH SCH,OMATAKUN RD OGBOM		
***Card PinNo:**	24913		
Card Usage:	You Have logged in time(s)		

*** Please note that only the last five (5) characters of the Card PIN is displayed.**

	Subject	Grade	Remark
1	English Language	C5	CREDIT
2	Mathematics	C6	CREDIT
3	Yoruba Language	C5	CREDIT
4	Economics	C5	CREDIT
5	Geography	C6	CREDIT
6	Biology	C5	CREDIT
7	Chemistry	C5	CREDIT
8	Physics	C6	CREDIT
9	Agricultural Science	C6	CREDIT

MINISTRY OF HEALTH
COLLEGE OF HEALTH TECHNOLOGY

P.M.B. 5042
IMELU, ILESA, OSUN STATE NIGERIA.

Your Ref:_____

Our Ref:_____

Established in 1977

Date: 18th April 2018

STATE FINAL EXAMINATION RESULT FOR DENTAL SURGERY TECHNICIAN

NAME OF STUDENT..... **AMOLE FUNMILOLA SERAH**

EXAM NO..... **14/SHT/DST/113**

TYPE OF COURSE..... **DENTAL SURGERY TECHNICIAN**

DURATION OF COURSE..... **3 YEARS**

PUNCTUALITY..... **CREDIT**

ACCURACY..... **GOOD** INTELLIGENCE..... **GOOD**

CONDUCT..... **GOOD** NEATNESS..... **V. GOOD**

STANDARD FOR CLINICAL PERFORMANCE..... **GOOD**

EXAMINATION RESULTS

	MARKED OBTAINED	GRADE	KEYS		
PAPER I	64	B	70 - 100	A	DISTINCTION
PAPER II	57	C	60 - 69	B	UPPER CREDIT
PAPER III	59	C	50 - 59	C	LOWER CREDIT
STEEPLE CHASE	85	A	40 - 49	D	PASS
HOSPITAL PRACTICAL	51	C	39 - BELOW	F	FAIL
TOTAL MARK	316				
PERCENTAGE	63%	UPPER CREDIT			

H.O.D REMARK/SIGNATURE_____

PROVOST'S REMARK/SIGNATURE_____

COLLEGE OF HEALTH TECHNOLOGY IMELU 18th April 2018

DR. ABOLUDE K.K.
CHIEF EXAMINER
CHIEF DENTAL SURGEON
STATE OF OSUN

DR. (MRS.) POPOOLA B.O.
FACULTY OF DENTISTRY
COLLEGE OF MEDICINE
UNIVERSITY OF IBADAN
OYO STATE

DR. NASIR WOA
PRINCIPAL DENTAL SURGEON
GOVERNMENT DENTAL CENTER
ILESA.

MR. AFUN L.A.
COMPREHENSIVE HEALTH CENTRE
IGBOKODA
ONDO STATE

All correspondence should be addressed to the principal

DENTAL THERAPISTS REGISTRATION BOARD OF NIGERIA

8A, OBA ADEYINKA OYEKAN STREET, BY IKOYI TOWERS, IKOYI, LAGOS.
E-mail: dtrbnb@gmail.com

Certificate of Annual Practising Licence

AMOLE FUNMILOLA SERAH

With Registration No. 5607

is hereby licenced by the Board

to practice as a

DENTAL SURGERY TECHNICIAN

This licence is valid until 31ST DECEMBER, 2019

DENTAL THERAPISTS REGISTRATION BOARD OF NIGERIA
REGISTRAR
DATE.....

23TH DECEMBER, 2019
Date of Issue

Registrar/CE, NIGERIA