



# NURSING AND MIDWIFERY COUNCIL OF NIGERIA

THIS LICENSE IS ISSUED TO:

Name:

**RAJI, BALIKIS O.**

PIN:

**72546/2023/G**

Date of Birth:

**16/04/2004**

Gender:

**F**

To Practice as:

**COMMUNITY MIDWIFE**

**023/3620**

Valid until:

**30/06/2026**



FEDERAL REPUBLIC OF NIGERIA