



# NURSING AND MIDWIFERY COUNCIL OF NIGERIA

THIS LICENSE IS ISSUED TO:

Name:

**OKUNEYE, KEHINDE A.**

PIN:

**88649/2024/A**

Date of Birth:

**23/02/2000**

Gender:

**F**

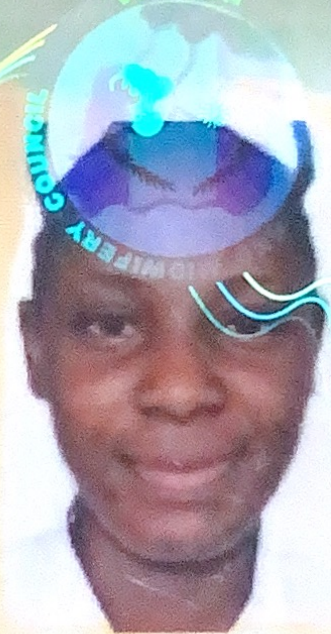
To Practice as:

**NURSE**

**001/228965**

Valid until:

**30/12/2026**



FEDERAL REPUBLIC OF NIGERIA