



# NURSING AND MIDWIFERY COUNCIL OF NIGERIA

THIS LICENSE IS ISSUED TO:

Name:

**AKINWALE, FERANMI E.**

PIN:

**36667/2021/B**

Date of Birth:

**22/05/1999**

Gender:

**F**

To Practice as:

**NURSE**

**001/197023**

Valid until:

**30/12/2023**



FEDERAL REPUBLIC OF NIGERIA

THE BEARER OF THIS LICENSE IS ALSO  
REGISTERED WITH THE COUNCIL AS:



THIS LICENSE IS AUTHORISED BY

  
\_\_\_\_\_  
SECRETARY GENERAL/REGISTRAR

IF FOUND PLEASE RETURN TO:  
NURSING AND MIDWIFERY COUNCIL OF NIGERIA. PLOT 713, CADASTRAL ZONE, LIFE CAMP, GWARIMPA, ABUJA  
P.M.B 2518. WUSE, ABUJA