



# ONDO STATE COLLEGE OF HEALTH TECHNOLOGY

ODA ROAD, P.M.B. 791, AKURE.

COMMUNITY HEALTH  
.....DEPARTMENT

Your REF: No.....  
All Communications should be address  
to the provost quoting:

Our Ref: No.....  
Website: [www.sohtak.edu.ng](http://www.sohtak.edu.ng)

Date: 27<sup>th</sup> NOV., 2019

## STATEMENT OF RESULT COMMUNITY HEALTH DEPARTMENT

NAME: OLANIYAN DEBORAH OLUWAGBOHUNMI  
CADRE: COMMUNITY HEALTH EXTENSION WORKER  
EXAMINATION NUMBER: B/002/081/19F  
YEAR OF EXAMINATION: SEPTEMBER, 2019

PAPER I:	75%
PAPER II:	74.5%
PAPER III:	77%
PRACTICAL:	66%
PERCENTAGE:	69.7%
REMARKS:	PASS

*Any alteration or erasure renders this result invalid.*

Congratulations.

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MRS. OLU-ADEBAYO O.  
HEAD OF DEPARTMENT

.....  
MR OYEWOLE I.A  
SIGN \_\_\_\_\_  
REGISTRAR  
ONDO STATE COLLEGE OF  
HEALTH TECH. AKURE.  
DATE: 27/11/19