

ARTHUR ASIRVATHAM HOSPITAL

42-A, KURUVIKARAN SALAI, MADURAI. 625 020.



This is to certify that Mr./ Mrs./ Miss.**V. ANGELINE GILENCY**.....

has successfully completed ..**DIETETIC INTERNSHIP**.....in this

hospital ~~on~~ / between ..**01.12.2023**... to **15.12.2023**

Dr. A.J. ASIRVATHAM
CONSULTANT DIABETOLOGIST

Date : 15.12.2023

Dr. EVELYN ASIRVATHAM
Proprietor