


$$\begin{array}{r} 19.324 \\ 8-9-11 \end{array}$$

1. ፍቀዱ የበጀት ዓመቱ ከገባ በኋላ እስከ ጳጉሜ መጨረሻ ካልታደሰ እንደተሰረዘ ይቆጠራል።
2. ፍቀዱ በድርጅቱ ውስጥ ፊትለፊት በሚታይ ቦታ መቀመጥ አለበት።
3. ለተቆጣጣሪ እና/ወይም ለሳይኒዳር ድርጅቱን ወደ ሌላ ቦታ ማዘዋወር አይቻልም።

Fudhadheera



በኦሮሚያ ብሔራዊ ክልላዊ መንግስት
OROMIA NATIONAL REGIONAL GOVERNMENT
ጤና ጥበቃ ቢሮ
HEALTH BUREAU



BEFO/AHITQFFWO/631241
ቀን 16/10/2014
የምዝገባ ቁጥር (Reg.No) EP = 95,039/2014

RPL=796

የሙያ ምዝገባና የሥራ ፈቃድ ምስክር ወረቀት

የኢትዮጵያ ፌዴራላዊ ዲሞክራሲያዊ ሪፐብሊክ መንግስት የአስፈጻሚ አካላት ስልጣንና ተግባር ለመወሰን በወጣው አዋጅ ቁጥር 661/2002 አንቀጽ 3/3 ለክልል ጤና ቢሮ በተሰጠው ስልጣንና ተግባር መሠረት፡-

ተካለኝ ሮማን ጉቱ

በዚሁ የብቃት ደረጃ አጭላተው በፌዴራል ፋርማሲስት ምስክር ወረቀት የሙያ ምዝገባና የሥራ ፈቃድ ምስክር ወረቀት

TEKALIGN CHOMAN GUTU

Having Duly Satisfied the requirements hereby registered and license as
EXPERT PHARMACIST


Shelene Dilgasa
Licensing & Registration
Coordinator

Signature of the authorized Personnel Date (Gregorian) 23/06/2022

ቀን 16/10/2014

N.B

- This certificate shall be renewed **every five** years.
- Is **unlawful** if it is found being used by another person.
- The holder is required to **notify** as soon as the certificate is lost

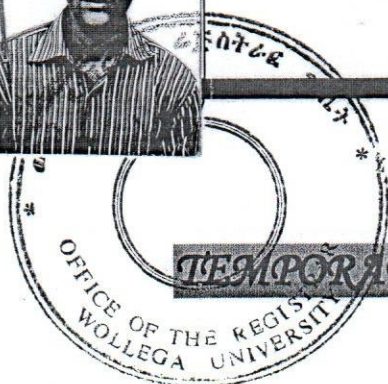


በዚሁ መሠረት በየአምስት ዓመቱ መታደስ አለበት፡፡
ለላ እካል ሊገለገልበት አይገባም፡፡
የሰነዱ ግዴታ አለብዎት፡፡

ጽ/ቤት



WOLLEGA
UNIVERSITY
REGISTRAR
OFFICE



TEMPORARY CERTIFICATE OF GRADUATION

This is to certify that **TEKALIGN CHOMAN GUTU** graduated
from Wollega University
with Bachelor of **PHARMACY (B.Pharm)** on October 24, 2011.

This Temporary Certificate of Graduation is given Pending the Printing and
Issuance of Actual Diploma.

A handwritten signature in ink, appearing to read "T. M. Gutu".

Registrar

October, 2011

ፖ.ሣ.ቁ. 395 ነቀምቲ
ስልክ ቁ. 057 661 5396
ፋክስ ቁ. 057 661 7980

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