



ID:00458

Al-Kindi Hospital
Amman - Jordan



مستشفى الكندي
عمان - الأردن

Privilege's For Doctors

24/12/2022

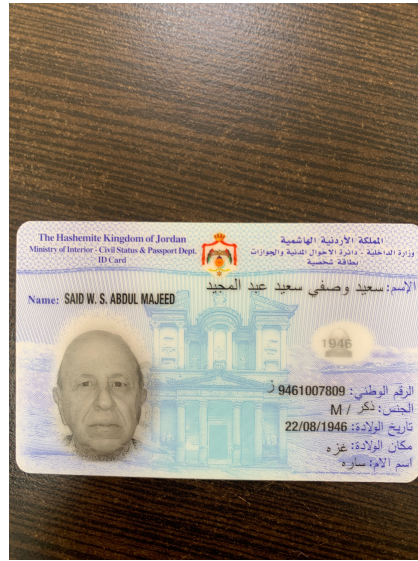
Name	Date of Birth	Specialty	
Said Wasfi Abdul majeed	22/08/1946	Orthopedic	
Phone	Clinic Phone	Email	Address
0777333354	0776564770	Saidmajeed7@gmail.com	Amman - 7th circle, Amman

Document

Personal photo

- [image.jpg](#)

National Identity



Bachelor's Certificate

- [image2.jpg](#)

M.O.H License for Specialty

- [image3.jpg](#)

Jordan Medical Association Registration

- [image4.jpg](#)

Board Certification Jordan-Arab

- [image5.jpg](#)

Additional Certificates

- [image6.jpg](#)

Privilege's

Orthopedic

Privileges in Orthopedic

PDF VIEW

Open a PDF file [Privileges in Orthopedic](#).

for any additional privileges insert it at next field

Consent

I agree to

I confirm that the all files and information attached above are complete and correct.
I authorize the hospital to verify them according to the instructions and regulations in the hospital, and I sign on all the above.

Signature



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