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The DataFlow Group Primary Source Verification Report



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Verification Report

Report Summary		
Applicant Name	ELSAYED MOHAMED ISMAIL ELZANATY	
DataFlow Case Reference	5003-2307-1583945	
Client Reference	SCFHS130720231689259126	
Application Type	NEW	
Issued To	SAUDI COMMISSION FOR HEALTH SPECIALTIES PO BOX 94656, RIYADH 11614, KINGDOM OF SAUDI ARABIA	
Issued On	16 AUGUST 2023	
Date of Receipt	13 JULY 2023	
Passport Number	A34171189	
SCHS License Number	NA	
Result	POSITIVE	

Report Status Color Reference Table		
Discrepancy	i) The concerned issuing authorities have reported one or more discrepancies in the information provided. ii) Discrepant records found against the concerned Applicant and or an associated Issuing Authority.	
Unable To Verify	One or more component(s) could not be verified due to i) i)An untraceable or unresponsive issuing authority. ii) An unconfirmed affiliation. iii)The documents submitted by the applicant were incomplete.	
Positive	The concerned issuing authorities have confirmed that the submitted details are verified.	

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Verification Component:Education		
Detail	Information Provided	Information Verified
Institute Name	ALEXANDRIA UNIVERSITY	CORRECT
Qualification Attained	BACHELOR OF PHARMACY	CORRECT
Mode of Study	ACTIVE ENROLLMENT	
Conferred Date/Examination Date/Issue Date	20 AUGUST 2022 (CONFERRED DATE)	CORRECT
Degree/Course Is Completed	YES	CORRECT
Remarks	Verified	





Verification Component:Health License		
Detail	Information Provided	Information Verified
Licensing Authority	ALEXANDRIA SYNDICATE OF PHARMACISTS	CORRECT
Licensing Attained	NOT SPECIFIED	PHARMACIST
Licensing Number	296950	CORRECT
License Valid From	02 NOVEMBER 2022	CORRECT
License Valid Till	19 NOVEMBER 2024	TILL DATE
Remarks	Verified	





Verification Component:Cross Check	
Remarks	No Derogatory Records Found







End Of Report