

NIDA Clinical Trials Network

Certificate of Completion

is hereby granted to

Nakitende Harriet

to certify your completion of the six-hour required course on:

GOOD CLINICAL PRACTICE

MODULE:	STATUS:
Introduction	N/A
Institutional Review Boards	Passed
Informed Consent	Passed
Confidentiality & Privacy	Passed
Participant Safety & Adverse Events	Passed
Quality Assurance	Passed
The Research Protocol	Passed
Documentation & Record-Keeping	Passed
Research Misconduct	Passed
Roles & Responsibilities	Passed
Recruitment & Retention	Passed
Investigational New Drugs	Passed

Course Completion Date: 16 February 2020

CTN Expiration Date: 16 February 2023

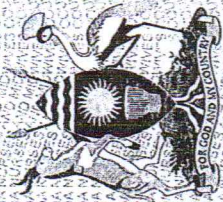
Tracee Williams, Training Coordinator

NIDA Clinical Coordinating Center

Good Clinical Practice, Version 5, effective 03-Mar-2017

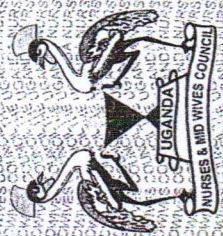
This training has been funded in whole or in part with Federal funds from the National Institute on Drug Abuse, National Institutes of Health, Department of Health and Human Services, under Contract No.

HHSN27201201000024C.



Practicing License

THE UGANDA NURSES AND MIDWIVES ACT, 1996 PART V SEC. 26



Serial No.

DAKIT ANDER HARRIET

is authorized and licensed to practice as a qualified

RN 13465 F ECA 6869

Licensed for Three Calendar Years

Date of Issue: **13/01/2022**

Licence No. **40275**

Date of Expiry **31/12/2025**

Office of the Registrar
Uganda Nurses and Midwives Council
P. O. Box 4046
Kampala - UGANDA
Tel: +256 393 290327
Email: info@unmc.ug | unmcouncil@yahoo.com
Website: www.unmc.ug

[Signature]

REGISTRAR





Completion Date 03-May-2020
Expiration Date 03-May-2023
Record ID 36464128

This is to certify that:

Nakitende Harriet

Has completed the following CITI Program course:

Human Research (Curriculum Group)
Human Subjects Protection (HSP) (Course Learner Group)
1 - Basic Course (Stage)

Under requirements set by:

International AIDS Vaccine Initiative (IAVI)

Not valid for renewal of certification through CME. Do not use for TransCelerate mutual recognition (see Completion Report).

CITI

Collaborative Institutional Training Initiative

Verify at www.citiprogram.org/verify/?w4bd0ea16-a145-4326-98d1-cdd22ba200d4-36464128



THE REPUBLIC OF UGANDA

THE UGANDA NURSES AND MIDWIVES ACT, 1996

(No. 19 OF 1996)

AND

THE NURSES AND MIDWIVES RULES, 1996

Certificate of Registration

No. 13465,

Date 29th October, 2018.

THIS IS TO CERTIFY that **Nakitende Harriet**.....
of **Kyakatabe, Villa Maria, Kalungu, Uganda**.....
has been registered as a **Nurse**.....



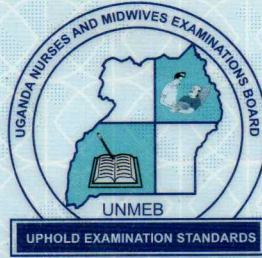
E. Ekong

Chairman

[Signature]

Ag. Registrar

DN 4796



M16/U020/DNE/016

UGANDA NURSES AND MIDWIVES
EXAMINATIONS BOARD

DIPLOMA

Awarded to

NAKITENDE HARRIET

Having completed a course of training in
Diploma in Nursing

at *MASAKA SCHOOL OF COMPREHENSIVE NURSING*

And having given proof of efficiency by passing examinations
administered by the board.

Date of Completion *November 2017*

[Signature]
SECRETARY



[Signature]
CHAIRMAN

UGANDA NURSES AND MIDWIVES EXAMINATIONS BOARD RESULT SLIP



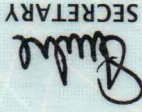
Candidate's Name: NAKITENDE HARRIET [Female]
Centre Name: MASAKA SCH. OF COMP. NURSING
Course: Diploma in Nursing (extension)
Index No: M16/U020/DNE/016
 November 2017

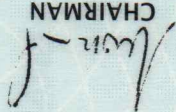
Details of Performance:

PAPER	GRADE
Medicine, Mental Health and Pharmacology	3
Community Health and Reproductive Health	3
Surgery and Gynaecology	3
Paediatrics, Midwifery and Health Services Management	3
Practicals and Oral	4
Research	5

OVERALL RESULT: C

UNMEB0048797

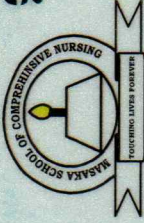

 SECRETARY


 CHAIRMAN



MINISTRY OF EDUCATION AND SPORTS
 MASAKA SCHOOL OF COMPREHESIVE NURSING

P.O.Box 445, Masaka
 Tel: +256 781 193283, +256 702 754 894
 E-mail: masakacns@yahoo.com



Certificate of Participation

This is to certify that

Nakitende Harriet

.....
 has successfully participated and completed on 6 days Pre-service course of
INTERGRATED MANAGEMENT OF CHILDHOOD ILLNESS (IMCI)
 10th - 15th July 2017

[Signature]

Director of Course
KIWANUKA BEN



[Signature]

Principal
Kalanzi Marc



THE REPUBLIC OF UGANDA
MINISTRY OF HEALTH

CERTIFICATE IN MIDWIFERY PROFICIENCY

This is to certify that

NAKITTENDE HARRIET

successfully completed a six months course in "Midwifery proficiency" at

MASAKA SCHOOL OF COMPREHENSIVE NURSING

and covered the following Course Units

- Unit 1. Obstetric Anatomy and Physiology
- Unit 2. Antenatal Care
- Unit 3. Labour
- Unit 4. Puerperium
- Unit 5. Care of the New Born

C. N. S.
Principal

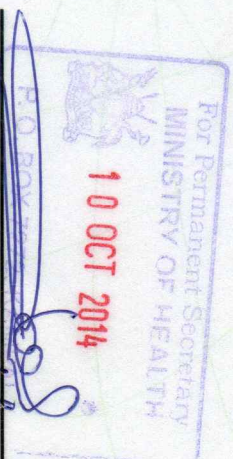
Official Stamp



PRINCIPAL

J. M.
Assistant Commissioner of Health Services
(Human Resources Development)

Official Stamp



UGANDA NURSES AND MIDWIVES EXAMINATIONS BOARD RESULT SLIP



UPHOLD EXAMINATION STANDARDS



Candidate's Name: NAKITENDE HARRIET [F]

Centre Name: VILLA MARIA SCH OF NURS Index No:

Course: CERTIFICATE IN COMPREHENSIVE NURSING

UNMEB/031/028

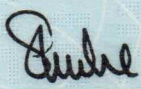
NOV 2011

Details of Performance:

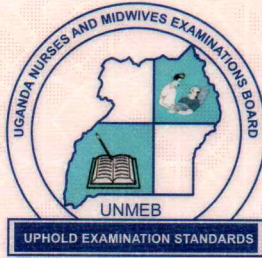
PAPER	GRADE
Midwifery, Paed., Comm. Nurs., Pharm.	4
Medicine, Surgery, Mental Health, Mgt	4
Practicals and Oral Examination	4

OVERALL RESULT: Credit

UNMEB0005851


SECRETARY


CHAIRMAN



UGANDA NURSES AND MIDWIVES
EXAMINATIONS BOARD

CERTIFICATE


Awarded to

NAKITENDE HARRIET

Having completed a course of training in
COMPREHENSIVE NURSING
at Villamaria school of Nursing and Midwifery

And having given proof of efficiency by passing examinations
administered by the board.

Date of Completion November 2011


SECRETARY

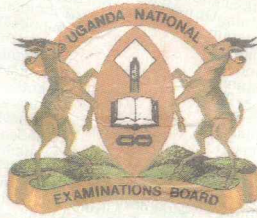



CHAIRMAN

U031/028

CCN 3360

Uganda National Examinations Board



This is to certify that the candidate named below sat for the Uganda Certificate of Education Examination in the year 2005, and qualified for the award of the

Uganda Certificate of Education

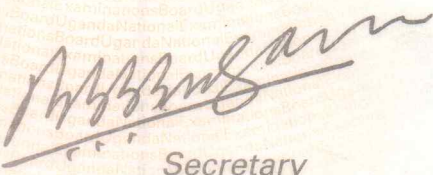
DIVISION II

THE CANDIDATE REACHED THE GRADE SHOWN IN THE SUBJECTS NAMED.

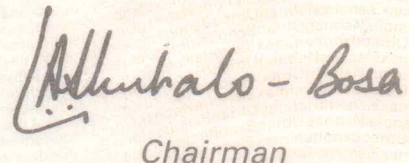
NAKITENDE HARRIET (AGE 18) U1562/039
BEXHILL HIGH SCHOOL, KAMUTUZA P.O. BOX 1036 MASAKA

	GRADE
ENGLISH	5 (FIVE)
CHRISTIAN RELIG ED	5 (FIVE)
HISTORY	2 (TWO)
GEOGRAPHY	4 (FOUR)
MATHEMATICS	6 (SIX)
AGRICULT PRINC & PRAC	4 (FOUR)
PHYSICS	6 (SIX)
CHEMISTRY	6 (SIX)
BIOLOGY	6 (SIX)
COMMERCE	5 (FIVE)

SUBJECTS NAMED: TEN SUBJECTS PASSED: TEN




Secretary



Chairman

Uganda National Examinations Board

Uganda National Examinations Board

Not valid without a hologram with the UNEB crest.
Hold this document to the light to verify  can be seen through the paper.
A thread is running vertically through the sheet.

U 1478357

(See overleaf)

**ST. LAWRENCE NURSES TRAINING SCHOOL
VILLA MARIA**

STUDENT'S IDENTITY CARD

Set: **39**

Name: **NAKITENDE HARRIET**



Desgn: **STUDENT**

Issuing Officer: *[Signature]*

Holder's Sgn: *[Signature]*

Date of Issue: **May 2009**

Exp. Date: **November 2012**

**REPUBLIC OF UGANDA
NATIONAL ID CARD**

SURNAME: **NAKITENDE**

GIVEN NAME: **HARRIET**

NATIONALITY: **UGA**

SEX: **F**

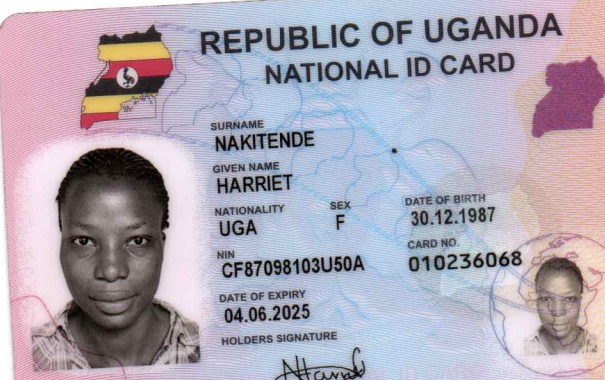


DATE OF BIRTH: **30.12.1987**

NIN: **CF87098103U50A**

DATE OF EXPIRY: **04.06.2025**

CARD NO.: **010236068**

HOLDERS SIGNATURE: *[Signature]*

Ministry of Education & Sports

**MASAKA SCHOOL OF
COMPREHENSIVE NURSING**

**M
SCN**

Name: **NAKITENDE HARRIET**

Designation: **STUDENT**

Course: **DN(Ext)**

Holder's Sign: *[Signature]*

Date of Issue: **1 JULY 2016**

Expiry Date: **30 JUNE 2018**

Issuing Officer: *[Signature]*

ID No. **M022/16**

