

Official Certification

This is to certify that YALLA. TSWARYA (Name of the student) Reg. No. 210637110053 has completed his/her Internship in Ratna Nursing Home (Name of the Intern Organization) on Nursing Management (Title of the Internship) under my supervision as a part of partial fulfillment of the requirement for the Degree of III BSc (CBZ) in the Department of Government Degree College (Name of the College).

This is accepted for evaluation.


Dr. N. KIRAN KUMAR
M.D., (GENERAL MEDICINE)



(Signatory with Date and Seal)

Endorsements

Faculty Guide



Head of the Department



Principal


Principal
Govt. Degree College
MANDAPETA - 533 308.



PROGRAM BOOK FOR
SEMESTER INTERNSHIP

Name of the Student: **Yalla Iswarya**

Name of the College: **Government Degree college Mandapeta**

Registration Number: **210637110053**

Period of Internship: **From: 05-02-2024 To: 05-05-2024**

Name & Address of the Intern Organization

Ratna Nursing Home Mandapeta

Dr.Br.Ambedkar konseema district

**ADikavi Nannaya University
Rajamahendravaram**

University

YEAR