



ID:00734

Al-Kindi Hospital

Amman - Jordan



مستشفى الكندي
عمان - الأردن

Al Kindi Residency Programs

Date:11/11/2024

Residency Programs

Are you a member of Al-Kindi Hospital staff?

No

Residency Program

General Surgery

Name

Wathiq Ali Hassan Shatnawi

Gender

Male

Date of Birth

21/06/1999

Phone

+962777906976

Email

wathiqali.99@gmail.com

Address

Irbid
Jordan

Graduated University

Jordanian

Graduated Year

2023

University Grade

Very Good

High School Grade

95.6

Required Documents

Note

I am writing to apply for the Surgery Residency Program at Al-Kindi Hospital. With a solid foundation in clinical skills and a deep commitment to surgical excellence, I am eager to contribute to and learn from your esteemed team.

Thank you for considering my application.



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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

Exam Date

Exam Date

18/11/2024

Exam Time

12:00 pm

Final result

Final result

19