

## **Vaccination Certificate**

I hereby certify that I have administered Hepatitis A vaccine to Mr./Ms. \_\_\_\_\_ a candidate for admission to the Post-Graduate Programme in Management (2018-2020 batch) at the Indian Institute of Management Nagpur.

\_\_\_\_\_  
Specimen Signature of candidate

\_\_\_\_\_  
Signature of the Doctor

Name of the Doctor: \_\_\_\_\_

(Seal)

Registration No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Place: \_\_\_\_\_

Date: \_\_\_\_\_