



# *Certificate of Participation*

**This is to certify that**

**Zalina Zahari**  
.....  
**has successfully completed**

## **Good Clinical Practice Workshop**

**05th October 2003 - 07th October 2003**

**Organised by  
CLINICAL TRIAL UNIT  
UNIVERSITI SAINS MALAYSIA**

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**DATO' DR. ISMAIL MERICAN**  
**DEPUTY DIRECTOR GENERAL OF HEALTH (R & TS)**  
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