RESUME

1.Name :Harvey. S

2.Address for Communication :Puthenveli House,Panayikulam(PO)

Via Alangad, Aluva-683511

Mob:8089921675

Mail ID:harveyvas@gmail.com

3.Date of Birth :25/11/1993

4. Educational Qualifications

Sl.No	Namof Exam	Year of	% of	Board/University
	Passed	Passing	Marks/Grade	
			obtained	
1	SSLC	2009	A+ in all subjects	Board of Public
				Examinations,
				Kerala State
2	PLUS TWO(HSS)	2011	92.9%	Board of Higher Secondary
				Examinations, Kerala
3	MBBS	2017	60.6	Rajiv Gandhi University of
				Health Sciences, Bangalore

5.Medical Council registration details :Reg.No.65852

Year 16/4/2018

Travancore Cochin Medical Council

I do hereby affirm that the details given above are true to the best of my knowledge and belief.

Ernakulam

07/01/2019 HARVEY S