International Institute of Health Sciences



 *Assignment*

Program and Batch:……………………………………………………………………………………………………………………………

Module:……………………………………………………………………………………………………………………………………………..

Title:…………………………………………………………………………………………………………………………………………………..

Name:………………………………………………………………………………………………………………………………………………..

Registration Number:………………………………………………………………………………………………………………………...

 Due Date:………………………………………………………………………………………………………………………………………….