



INSTITUTE
OF THE MOTOR
INDUSTRY

This is to certify that

Fullname

has successfully completed the

SAMPLE

Qualification Title

Description 1

Qualification Number

Steve Nash (Image)

Steve Nash (Name)
Steve Nash (Job Title)

Certificate Number:

Certificate Number

Candidate Number:

Candidate Number

Date Issued:

Issue Date

ofqual
REGULATED
register.ofqual.gov.uk



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