

Proof of Status

Herewith we confirm that

Mrs./Ms.

Mr. _____

is a **Non-physician or therapists** (occupational therapist, speech therapist, physiotherapist, clinical psychologist, orthotics & prosthetics, social worker, nurses, special educator & others)

is a **Trainee**

is a **PhD student**

is a **Resident**

is a **Fellow**

in our company/institution/organisation.

City, Date _____

Signature and Stamp _____