

The University of the State of New York

Education Department

Office of the Professions

REGISTRATION CERTIFICATE

Do not accept a copy of this certificate

License Number: 677009-1

Certificate Number: 8311725



is registered to practice in New York State through 07/31/2016 as a(n)

REGISTERED PROFESSIONAL NURSE

BELTRAME GIANNELLA P
91-44 89TH ST
WOODHAVEN

NY 11421-3015

LICENSEE/REGISTRANT

Annella Beltrame

EXECUTIVE SECRETARY

Suzanne Sullivan

Jul 25, 2016
COMMISSIONER OF EDUCATION

DEPUTY COMMISSIONER
FOR THE PROFESSIONS

Dee E. Pele

This document is valid only if it has not expired, name and address are correct, it has not been tampered with and is an original - not a copy. To verify that this registration certificate is valid or for more information please visit www.op.nysed.gov.

NEW YORK CITY COLLEGE OF TECHNOLOGY
OF

THE CITY UNIVERSITY OF NEW YORK

ON THE RECOMMENDATION OF THE FACULTY
AND BY VIRTUE OF THE AUTHORITY VESTED IN IT

THE BOARD OF TRUSTEES OF THE CITY UNIVERSITY OF NEW YORK
CONFERS UPON

GIANNIELA P. BELTRAME

THE DEGREE OF

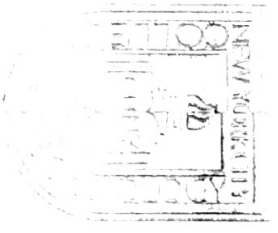
ASSOCIATE IN APPLIED SCIENCE

AND HAS GRANTED THIS DIPLOMA AS EVIDENCE THEREOF
GIVEN IN THE CITY OF NEW YORK IN THE STATE OF NEW YORK
IN THE UNITED STATES OF AMERICA

JUNE 4, 2013

Matthew J. Rodolfini
CHANCELLOR OF THE UNIVERSITY

Rene Schultz
CHAIR OF THE BOARD



Rene Schultz
PRESIDENT

Rene Schultz
PROVOST & VICE PRESIDENT
FOR ACADEMIC AFFAIRS

THE UNIVERSITY OF THE STATE OF NEW YORK
EDUCATION DEPARTMENT



BE IT KNOWN THAT

GIANNELLA P BELTRAME

HAVING GIVEN SATISFACTORY EVIDENCE OF THE COMPLETION OF PROFESSIONAL
AND OTHER REQUIREMENTS PRESCRIBED BY LAW IS QUALIFIED TO PRACTICE AS A

REGISTERED PROFESSIONAL NURSE

IN THE STATE OF NEW YORK

IN WITNESS WHEREOF THE EDUCATION DEPARTMENT GRANTS THIS LICENSE
UNDER ITS SEAL AT ALBANY, NEW YORK
THIS TWENTY-SEVENTH DAY OF AUGUST, 2013.

Jul 25. 13
PRESIDENT OF THE UNIVERSITY
AND COMMISSIONER OF EDUCATION
LICENSE NUMBER
677009



Dele E. Hill
DEPUTY COMMISSIONER
FOR THE PROFESSIONS
Suzanne Sullivan
EXECUTIVE SECRETARY
STATE BOARD FOR
NURSING

Healthcare Provider



American
Heart
Association®

GIANNELLA BELTRAME

This card certifies that the above individual has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association BLS for Healthcare Providers (CPR and AED) Program.

Issue Date **12/19/2013**

12/2015
Recommended Renewal Date

Training

TC ID #

Center Name **FIRST RESPONSE ADVANTAGE**

TC **NEW YORK REGION**

NY-20830

Info

City, State

ZIP

646-290-6540

Course

Location

FIRST RESPONSE ADVANTAGE

Instructor

Inst. ID #

Name

BRIAN PRINGLE 01120074181

Holder's

Signature

