

**FORMAT OF EXPERIENCE CERTIFICATE  
(ON LETTER HEAD OF THE INSTITUTION/ORGANIZATION)**

This is to certify that Shri / Smt. / Kumari..... was/ is an employee of this organization/Department and duties performed by him/her during the period(s) are as under:

1)	Position held	
2)	From	
3)	To	
4)	Total period	
5)	Nature of Appointment- Permanent, Regular, Temporary, Part-Time, Contract etc.	
6)	Department Specifically worked in	
7)	Worked at supervisory level/ Junior management level/ Middle Management level	
8)	Pay scale and last salary drawn	
9)	Place of Posting	
10)	Duties performed in details (please attach sheet, if needed)	

It is certified that above facts and figures are true and based on service records available in our organization.

Date:

Signature

Place:

Name of competent authority

Stamp