

EXPERIENCE CERTIFICATE

Name of the Firm:
(Company/Corporation/Government Department/Co-op Institution etc)

Registration Number & Date of Registration:

Registration Issuing Authority:

This is to certify that Sri.....
.....(Name and address of the Candidate) has worked/has been working in this institution as Driver (LMV, HGMV & HPMV) (Here enter the nature of assignment viz casual labour paid/unpaid apprentice/regular worker or any other capacity holding or held in the institution) on Rs..... per day/per mensum for the period of years months..... days from..... to

Dated Signature, Name & Designation of the Issuing Authority with name of the Institution.

Place
Date:

(Office Seal)

CERTIFICATE

Certified that Sri..... mentioned in the above experience certificate has worked/is working as Driver (LMV, HGMV & HPMV) (Specify nature of employment) in the above institution during the period mentioned therein as per the entry in theRegister (Name of the Register to be specified) maintained by the employer as per the provisions of theAct (Name of Act/Rules to be specified). Also certified that I am the authorized person to inspect the Registers kept by the Employer as per the provisions of the Act/Rules of the State/Central Government.

*Signature with Date
Name of the Attesting Officer with Designation.*

Place:
Date :

(Office Seal)

(The Experience Certificate and Certificate of countersigning authority should be in a single page.)