## **EXPERIENCE CERTIFICATE**

Name of the Firm:	
(Company/Corporation/Government Depart	rtment/Co-op Institution etc)
Registration Number & Date of Registration	on:
Registration Issuing Authority:	
This is to certify that Sri	
	of the Candidate) has worked/has been working
in this institution as Driver (LMV, HGMV & HPMV) (Here enter the nature of assignment	
	e/regular worker or any other capacity holding or
	per day/per mensum for the period
of years days from to	
	Dated Signature Name & Designation of the
	Dated Signature, Name & Designation of the Issuing Authority with page of the Institution
Place:	Issuing Authority with name of the Institution.
Date: (Office	Seal)
Date. (Office	Jean)
<u>CERTIFICATE</u>	
Contified that Cri	mentioned in the above
	working as Driver (LMV, HGMV &
· · · · · · · · · · · · · · · · · · ·	ture of employment) in the above institution
-	the entry in the Register (Name of the Register to
	employer as per the provisions of of Act/Rules to be specified). Also certified that I
· ·	gisters kept by the Employer as per the provisions
of the Act/Rules of the State/Central Gover	
of the Act/Kules of the State/Central Gover	innent.
	Signature with Date
N	ame of the Attesting Officer with Designation
Place:	and of the fitteding officer with Designation
Date: (Office	Seal)
Zuc. (Office)	<i>50</i> ,

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

Note: 1. The Experience should be acquired after obtaining the academic or other basic Qualifications.

- 2. The veracity of the Experience Certificate will be subjected to scrutiny and action will be taken against those who issue or produce bogus certificate. The Experience Certificate should be countersigned by an Authorized Officer of the State/Central Government.
- 3. For further details regarding experience, please see Para 20 Part II of the General Conditions.