

Appendix- II

EXPERIENCE CERITIFICATE (On the official letter head of the Employer)

Name –

Date of Birth of -

Name of Employer -

Type of Organisation (Government/Non-Government) -

Date of Joining-

Designation at the time of Joining -

Probationary / Training period –

Date of Confirmation in Service -

Areas worked:

- 1. Designation 1, Work Area/ Department, From: *Month, Year* to *Month, Year* Responsibilities handled
 - Responsibility 1
 - Responsibility 2
 - Responsibility 3
- 2. Designation 2, Work Area/ Department, From: *Month, Year* to *Month, Year* Responsibilities handled
 - Responsibility 1
 - Responsibility 2
 - Responsibility 3
- 3. Designation 3, Work Area/ Department, From: *Month, Year* to *Month, Year* Responsibilities handled
 - Responsibility 1
 - Responsibility 2
 - Responsibility 3

10. Date of Leaving (if applicable) -

- 11. Reason for Leaving -
- 12. Current / Last Designation -
- 13. Total experience (as on 01.03.2020) Years Months Days

This is certified that all the information provide above is correct to the best of our knowledge.

Name of the Employer Authorised Signatory, Stamp Date