## CERTIFICATE OF EXPERIENCE

Name of the Institution (Govt/Regd.society/ Local body/Grant-in-aid Institution)	;
Register Number (SSI Registration or any other Registration Number and date of Registration)	:
Authority Issued Registration	
	Signature with the date, Name and Designation of the Issuing Authority with Name of the Institution
Place : Date :	
	(Office Seal)
	<u>DECLARATION</u>
as(specify the na as per the entry in the above Register maint	mentioned in the above experience Certificate has actually worked/isworking sture of employment) in the above Institution during the period mentioned there in ained by the employer as per the provision ofact (Name of person to inspect the Registers kept by the employer as per the provision of theState/Central Act.
	Signature with date, Name of Attesting Officer with Designation and Name of Office, who is the notified Enforcement Officer as per the Act/Rules.
Place: Date :	

(Office Seal)