

**Certificate of Experience**  
**[Certificate to be furnished by the organization on letter head]**

It is certified that Shri/Smt./Kum \_\_\_\_\_ was working in this Organization / Institution / Office holding post of Contractual/ Bonded Medical Officer.

His/her total experience in our Organization/Institution / Office is as follows: State whether Contract basis / Bonded candidates.

Sr. No.	Place of work (Institute Name)	Period from.....to....	Nature of Appointment (Bonded /Contractual)	Place of posting ( Tribal/Non-tribal/Hilly Area)	Period in Months	Order issued by
(1)						
(2)						
(3)						
(4)						
(5)						

1. Certified that in the event of selection of Shri/Smt/Kum. \_\_\_\_\_ he/she will be relieved of his duties in this office.
2. Certified that the above mentioned experience possess by the employee is/was as per the experience prescribed in the respective advertisement.

Place :

Signature :

Date :

Designation :

Office Seal :

Office Address :

\_\_\_\_\_  
\_\_\_\_\_

Contact NO-