(ON THE LETTER HEAD HAVING CONTACT NUMBER AND COMPLETE ADDRESS)

EXPERIENCE CERTIFICATE (SPECIMEN)

This is to certify that Shri/Mrs is /was working in PSBs / reputed Private Banks / reputed Academic Institutesfromto
(Date). He /She was mainly entrusted with the work Experience as faculty in Training establishment at any PSBs / reputed Private Banks / reputed Academic Institutes department and has sufficient knowledge of Training. The work performance is satisfactory.
Signature (Name and Designation) Head of the Department/Competent authority Name of the in PSBs / reputed Private Banks / reputed Academic Institutes & Seal
Date:
Place: