

APPENDIX-2

(DoPT OM No.36034 / 2/ 91-Estt. (SCT), dated 03.04.1991)

PROFORMA OF CERTIFICATE FOR EMPLOYED OFFICIALS

I hereby, with the information available, certify that
Shri. (Name) No..... (Rank)
would complete prescribed period of appointment on (Date).

Place :

Signature of the Commanding Officer

Dated :

Office seal