

Part Form - Y (II)

The form of certificate to be produced by Candidates for choosing experience

**FORM - I**  
**Experience Certificate**

Letter Head of the Institution/Issuing Authority

*Government Polytechnic  
Ferozshahpur, District Ferozshahpur  
Ferozshahpur, Punjab*

Telephone No. 01573-277000  
Fax No. \_\_\_\_\_

Address of the Organization

This is to certify that Sr. Microbiologist, District Milk Producers' Cooperative Societies, Government of Punjab (Name of the employee of this Organization/Department/Ministry and dates performed by him/her during the period) are as under

Name of post held	From date	To date	Total period (months)	Nature of Appointment: Regular, Temporary, Part-time, Contract, Quota, Honorary etc.	Department/ Specialty/Field of experience
(1) Lecturer Microbiology	(2) 01/11/2016	(3) 31/10/2017 (Basically working in 45 days) Place of posting	(4)	(5) Regular	(6) Ferozshahpur Microbiology Worked at a supervisory level/middle management level/head of branch
(7) Low 1900 2,270/- 24/07	(8) Ferozshahpur	(9) Ferozshahpur	(10) 10	(11) Regular	(12) Teaching (Microbiology)

2. It is certified that above facts and figures are true and based on service records available in our organization/Department/Ministry.

  
  
 Signature  
 Name of competent authority  
 Stamp of competent authority