SERVICE CERTIFICATE (CENTRAL GOVERNMENT)

Certified that				,		working as a	
regular/permar	nent/tempora	ry/contractua	l/part ti	me/casual employee	e in the	capacity of	
			in thi	s office/Ministry/un	der the	Ministry of	
				ment of India. He/		employee of	
Defence Ser	vice/CRPF/E	SF/NSG/SPC	G/CISF/C	Central Govt./Centra	al Govt.	Autonomous	
body/Central g	ovt. PSU full	y financed/pa	artially fi	nanced by the Central	Govt. His/h	ner services are	
non-transferab	le / transferal	ole anywhere	in India.				
Complete Add	ress and tele	phone No. of	the Offi	ce (in Block Letters)			
Place:		 	Signature of Head of the Office				
Date:			(With	(with Name, Designation and Office Stamp)			
	CED	TIELCATE	OE NIIN	ADED OF TDANSEE	DC		
	CEK	HIFICATE		IBER OF TRANSFE			
I			(Vame)	27. 2	1 0 000) 1	
(rank /designation) of (Name of the Off hereby certify that during the past 7 years (Up to 31.03.2025) I have been training the past 7 years (Up to 31.03.2025)							
nereby certify							
hatwaan tha fo				rds) from one station to and the minimum pe		•	
				e details of which are			
				d incorrect, my child v			
admission in K				, ,	1		
	, , ,	, J	1		D: /	T	
	Date of	Date of	Period		Distance between		
Office/Unit	Joining	Release	of stay	Transferred	the Two	Transfer Order	
and Place	the Office/ Unit	from the Office/Unit	(in days)	Office/Unit and Place	Office (in	No.	
			uu y s y		km)		
	1				I.		
				Q:		- D 4	
		COLU	NTED C		nature of the	e Parent	
		·		<u>IGNATURE</u>			
I, (Name) (Rank/Designation) (Name of the Office/Unit/Department) hereby certify tha							
4 4 1		(Na	me of the	e Office/Unit/Departm	ent) hereby	certify that	
	given in abor	ve have been	authentic	cated by the records he	eid in the of	fice and	
found correct.							
Place:				Signature of Head	of the Offic	e	
Date:	Place: Signature of Head of the Office Oate: (with Name, Designation and Office Stamp)						