FORMAT OF EXPERIENCE CERTIFICATE

This is to certify that ______ S/o, D/o ______ has been working/has worked as Assistant Professor (Regular/Temporary/Ad-hoc/Contract/Guest Faculty /Part-time) in the consolidated salary/pay-scale of ₹______ (mention consolidated salary/pay-scale) w.e.f. _____ to _____ in subject/branch/department/specialization.

This is further certified that he/she has been taking/has taken the assigned ______ hours per week workload for teaching Under-graduate/ Post- graduate/both Under-graduate and Post-graduate classes during the above mentioned period.

Full Signature of Authority with Official Stamp

Full Name, Designation and Address of the Authority
