

CERTIFICATE

Certified that I _____
(Name of Officer) Personnel Number (if allotted)

_____ have on _____ submitted my
(Group/Service) (BPS) (Date)

Performance Evaluation Report for the period _____

to _____
(Name/Designation of Reporting Officer)

My countersigning officer is _____
(Name/Designation of Countersigning Officer)

Signatures _____

Designation/Department _____

Note:- This certificate is required to be dispatched by the officer being reported upon to the Officer Incharge entrusted with the maintenance of his/her C.R dossier on the same date the PER is forwarded to his/her reporting officer.