

JOB CERTIFICATE

Name of employee:

Identity code of employee:

Tasks performed by the employee in our service:

Employment has commenced:

Employment has ended:

FIELDS MARKED WITH AN ASTERISK (*) TO BE FILLED IN ONLY BY EMPLOYEE'S REQUEST

Reason for termination of employment (*):

Evaluation: excellent, good, satisfactory, passable, poor (*)

Work skills (*):

Behaviour (*):

Name of company:

Address:

Phone number:

Place and date:

Signature: _____

Print name: